

**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 linesUnited Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

ADDRESS (number and street)

534 S Route 73, PO Box 73

☐Check if different
than previously
reported. (ACC)

Winslow

NJ

08095

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00173419

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

2008

through

09

30

2008

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 Page

Signature of Treasurer

Electronically Filed by Thomas Page

Date

11

19

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**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

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		138209.85
(b) Cash on Hand at Beginning of Reporting Period	181298.92	
(c) Total Receipts (from Line 19)	90612.70	298629.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	271911.62	436839.68
7. Total Disbursements (from Line 31)	89816.79	254744.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182094.83	182094.83
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY 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)

Page 3

Write or Type Committee Name

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 9 3 0 2 0 0 8

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	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	90612.70	298629.83
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	90612.70	298629.83
(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) ➤	90612.70	298629.83
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))	90612.70	298629.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	90612.70	298629.83

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) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	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.....	89816.79	249744.85
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))..	89816.79	254744.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	89816.79	254744.85

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)	90612.70	298629.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90612.70	298629.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 6 / 22

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial)
Albano, Milam for the 1st District

Mailing Address PO Box 941

City State Zip Code
Cape May Ct House NJ 08210

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6444

Date of Disbursement

09 / 03 / 2008

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Atlantic County Democratic Committee

Mailing Address PO Box 251

City State Zip Code
Northfield NJ 08225

Purpose of Disbursement
Stopped payment check #1995 4/23/2008

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6406

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

-5000.00

C. Full Name (Last, First, Middle Initial)
Atlantic County Democratic Committee

Mailing Address PO Box 251

City State Zip Code
Northfield NJ 08225

Purpose of Disbursement
Contribution-reissue stop pymt ck#1995

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6421

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

500.00

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 7 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A.

Full Name (Last, First, Middle Initial)

Bunyon and Malley for Council

Mailing Address 169 Broad Street

City Matawan State NJ Zip Code 07747

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6459

Date of Disbursement

09 / 17 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Burlington County Democratic Committee

Mailing Address 214 High Street

City Burlington State NJ Zip Code 08016

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6410

Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Caesars Casino Hotel

Mailing Address PO Box 389

City Atlantic City State NJ Zip Code 08401

Purpose of Disbursement
Conference-Atlantic City, NJ

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6431

Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

1792.32

SUBTOTAL of Disbursements This Page (optional)

3792.32

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 8 / 22

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial)
Camden County Democrat Committee

Mailing Address 2240 - 15 Route 70 West

City Cherry Hill State NJ Zip Code 08002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6440

Date of Disbursement

08 / 27 / 2008

Amount of Each Disbursement this Period

10000.00

B. Full Name (Last, First, Middle Initial)
Camden County Democrat Committee

Mailing Address 2240 - 15 Route 70 West

City Cherry Hill State NJ Zip Code 08002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6461

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Carew, Smith & Kern

Mailing Address PO Box 435

City Northfield State NJ Zip Code 08225

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB29.6450

Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

15500.00

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 9 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Full Name (Last, First, Middle Initial) Committee to Elect Larry Bulman	Transaction ID: SB29.6445 Date of Disbursement																				
Mailing Address 13 Spruce Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	0	8												
City S Glens Falls State NY Zip Code 12803	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
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) ▼																				
Category/Type: 011																					
B. Full Name (Last, First, Middle Initial) Conaway for Assembly	Transaction ID: SB29.6409 Date of Disbursement																				
Mailing Address 155 Polifly Road, Suite 103 1st Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	8												
City Hackensack State NJ Zip Code 07601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
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) ▼																				
Category/Type: 011																					
C. Full Name (Last, First, Middle Initial) Conaway for Assembly	Transaction ID: SB29.6457 Date of Disbursement																				
Mailing Address 155 Polifly Road, Suite 103 1st Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	0		2	0	0	8												
City Hackensack State NJ Zip Code 07601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
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) ▼																				
Category/Type: 011																					

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 10 / 22

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial) Cumberland County Democrat Organization	Transaction ID: SB29.6411 Date of Disbursement
Mailing Address PO Box 812	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Cherry Hill NJ 08034</div> </div> <div> <div>Purpose of Disbursement Contribution</div> <div>011</div> </div> <div> <div>Candidate Name</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>2000.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> </div>	
B. Full Name (Last, First, Middle Initial) Cumberland County Democrat Organization	Transaction ID: SB29.6443 Date of Disbursement
Mailing Address PO Box 812	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 3 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Cherry Hill NJ 08034</div> </div> <div> <div>Purpose of Disbursement Contribution</div> <div>011</div> </div> <div> <div>Candidate Name</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>10000.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> </div>	
C. Full Name (Last, First, Middle Initial) Democratic Assembly Campaign Committee	Transaction ID: SB29.6456 Date of Disbursement
Mailing Address PO Box 3712	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 0 / 2 0 0 8</div> </div>
<div> <div>City State Zip Code</div> <div>Trenton NJ 08629</div> </div> <div> <div>Purpose of Disbursement Contribution</div> <div>011</div> </div> <div> <div>Candidate Name</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>4500.00</div>
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>State: District:</div> </div>	

SUBTOTAL of Disbursements This Page (optional)

16500.00

TOTAL This Period (last page this line number only)

<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

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

2000.00

500.00

12000.00

FEC Schedule B (Form 3X) (Revised 02/2003)

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 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Full Name (Last, First, Middle Initial) Inverness Hotel	Transaction ID: SB29.6472 Date of Disbursement																				
Mailing Address 200 Inverness Drive W.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	8												
City Englewood State CO Zip Code 80112	Amount of Each Disbursement this Period																				
Purpose of Disbursement Hotel - National Democratic Convention	<table border="1"> <tr> <td>1087.52</td> </tr> </table>	1087.52																			
1087.52																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) Jack Connors for Assembly	Transaction ID: SB29.6437 Date of Disbursement																				
Mailing Address 155 Polifly Road Suite 103	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	0	8												
City Hackensack State NJ Zip Code 07601	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) Jim McGettigan for Sheriff	Transaction ID: SB29.6439 Date of Disbursement																				
Mailing Address 106 S. Oxford Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	0	8												
City Ventor State NJ Zip Code 08406	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1000.00

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 13 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Full Name (Last, First, Middle Initial) James B Kehoe	Transaction ID: SB29.6435 Date of Disbursement																				
Mailing Address 534 S Route 73	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	0		2	0	0	8												
City Winslow State NJ Zip Code 08095	Amount of Each Disbursement this Period																				
Purpose of Disbursement Per Diem-Democratic Convention Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
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) James B Kehoe	Transaction ID: SB29.6447 Date of Disbursement																				
Mailing Address 534 S Route 73	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	0		2	0	0	8												
City Winslow State NJ Zip Code 08095	Amount of Each Disbursement this Period																				
Purpose of Disbursement Per Diem Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
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) Louis Greenwald for Assembly	Transaction ID: SB29.6455 Date of Disbursement																				
Mailing Address 2240-15 Route 70	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	0		2	0	0	8												
City Cherry Hill State NJ Zip Code 08002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1200.00

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 14 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A.

Full Name (Last, First, Middle Initial)

Raymond MacDowell

Mailing Address 534 S Route 73

City
Winslow

State
NJ

Zip Code
08095

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6448

Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mary Bridget Enterprises

Mailing Address 18 Stirling Way

City
Lumberton

State
NJ

Zip Code
08048

Purpose of Disbursement
PAC Supplies

Candidate Name

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6422

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

2827.77

C.

Full Name (Last, First, Middle Initial)

National Park Democratic Committee

Mailing Address 215 Lake Avenue

City
National Park

State
NJ

Zip Code
08063

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6423

Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

3627.77

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 15 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A.

Full Name (Last, First, Middle Initial)

NJ State AFL-CIO

Mailing Address 106 W State Street

City
Trenton

State
NJ

Zip Code
08608

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6432

Date of Disbursement

08 / 13 / 2008

Amount of Each Disbursement this Period

1440.00

B.

Full Name (Last, First, Middle Initial)

NJ State Association of Pipe Trades

Mailing Address PO Box 73

City
Winslow

State
NJ

Zip Code
08095

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6408

Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

3282.78

C.

Full Name (Last, First, Middle Initial)

NJ State Association of Pipe Trades

Mailing Address 534 S Route 73

City
Winslow

State
NJ

Zip Code
08095

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6429

Date of Disbursement

08 / 06 / 2008

Amount of Each Disbursement this Period

3325.16

SUBTOTAL of Disbursements This Page (optional)

8047.94

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 16 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Full Name (Last, First, Middle Initial) NJ State Association of Pipe Trades	Transaction ID: SB29.6442 Date of Disbursement																				
Mailing Address 534 S Route 73	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	0	8												
City Winslow State NJ Zip Code 08095	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td>3249.14</td> </tr> </table>	3249.14																			
3249.14																					
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) Ocean County Democratic Organization	Transaction ID: SB29.6426 Date of Disbursement																				
Mailing Address 6 Hooper Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	0	8												
City Toms River State NJ Zip Code 08753	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
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) Pacifco Airport Valet	Transaction ID: SB29.6470 Date of Disbursement																				
Mailing Address 6715 Essington Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	7		2	0	0	8												
City Philadelphia State PA Zip Code 19153	Amount of Each Disbursement this Period																				
Purpose of Disbursement Valet Service National Democratic Conv Candidate Name	<table border="1"> <tr> <td>56.60</td> </tr> </table>	56.60																			
56.60																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4249.14

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 17 / 22

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A.

Full Name (Last, First, Middle Initial)

Shulman, Kurtz, Turer & Topaz, LLC

Mailing Address 101 N Lakeview Drive

City
Gibbsboro

State
NJ

Zip Code
08026

Purpose of Disbursement
Accounting Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6430

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1700.00

B.

Full Name (Last, First, Middle Initial)

Southern NJ AFL-CIO COPE

Mailing Address 4212 Beacon Avenue

City
Pennsauken

State
NJ

Zip Code
08109

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6463

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1750.00

C.

Full Name (Last, First, Middle Initial)

Southern NJ Labor Advocacy Fund

Mailing Address PO Box 1065

City
Pennsauken

State
NJ

Zip Code
08109

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.6464

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5950.00

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 18 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial) Spirit Air Lines	Transaction ID: SB29.6468 Date of Disbursement																				
Mailing Address 2800 Executive Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	3		2	0	0	8												
City Miramar State FL Zip Code 33025	Amount of Each Disbursement this Period																				
Purpose of Disbursement UA PAC Meeting	<table border="1"> <tr> <td colspan="10">527.00</td> </tr> </table>	527.00																			
527.00																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼ [MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Sutton for Freeholder	Transaction ID: SB29.6449 Date of Disbursement																				
Mailing Address 503 Dogwood Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	0		2	0	0	8												
City Egg Harbor Twp State NJ Zip Code 08234	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">2600.00</td> </tr> </table>	2600.00																			
2600.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) UA PEC	Transaction ID: SB29.6407 Date of Disbursement																				
Mailing Address PO Box 37800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	2		2	0	0	8												
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1641.00</td> </tr> </table>	1641.00																			
1641.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4241.00

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 19 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial) UA PEC	Transaction ID: SB29.6428 Date of Disbursement																				
Mailing Address PO Box 37800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1663.00</td> </tr> </table>	1663.00																			
1663.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) UA PEC	Transaction ID: SB29.6441 Date of Disbursement																				
Mailing Address PO Box 37800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	0	8												
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1625.00</td> </tr> </table>	1625.00																			
1625.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
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) UA Visa	Transaction ID: SB29.6434 Date of Disbursement																				
Mailing Address PO Box 856176	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	8												
City Louisville State KY Zip Code 40285	Amount of Each Disbursement this Period																				
Purpose of Disbursement Democratic Convention	<table border="1"> <tr> <td>615.50</td> </tr> </table>	615.50																			
615.50																					
Candidate Name	<table border="1"> <tr> <td>002</td> </tr> </table> Category/ Type	002																			
002																					
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) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3903.50

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 20 / 22

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol
Ed

A. Full Name (Last, First, Middle Initial) UA Visa Mailing Address PO Box 856176	Transaction ID: SB29.6458 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 7 / 2 0 0 8</div> </div>
City Louisville State KY Zip Code 40285 Purpose of Disbursement UA Pac Meeting Candidate Name 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) ▼	Amount of Each Disbursement this Period <div>1755.12</div> <div>002</div> Category/ Type
B. Full Name (Last, First, Middle Initial) US Airways Mailing Address 4000 E. Sky Harbor Blvd. City Phoenix State AZ Zip Code 85034 Purpose of Disbursement National Democratic Convention Candidate Name 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) ▼	Transaction ID: SB29.6465 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>615.50</div> <div>002</div> Category/ Type [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) US Airways Mailing Address 4000 E. Sky Harbor Blvd. City Phoenix State AZ Zip Code 85034 Purpose of Disbursement National Democratic Convention Candidate Name 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) ▼	Transaction ID: SB29.6467 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>84.00</div> <div>002</div> Category/ Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

1755.12

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 21 / 22

<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

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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Full Name (Last, First, Middle Initial) Van Drew for Senate Mailing Address PO Box 941	Transaction ID: SB29.6412 Date of Disbursement <div> <div>07</div> <div>02</div> <div>2008</div> </div>
City State Zip Code Cape May Ct House NJ 08210 Purpose of Disbursement Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> 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:	Amount of Each Disbursement this Period <div>1200.00</div>
B. Full Name (Last, First, Middle Initial) West Democrat Executive Committee Mailing Address Po Box 355 City State Zip Code West Deptford NJ 08086 Purpose of Disbursement Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> 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:	Transaction ID: SB29.6453 Date of Disbursement <div> <div>09</div> <div>10</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>1600.00</div>
C. Full Name (Last, First, Middle Initial) Woodbury Heights Democrats Mailing Address 419 Oak Avenue City State Zip Code Woodbury Heights NJ 08097 Purpose of Disbursement Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> 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:	Transaction ID: SB29.6420 Date of Disbursement <div> <div>07</div> <div>02</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>1000.00</div>

SUBTOTAL of Disbursements This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

89816.79

Image# 28934406982

Form/Schedule: **F3XA**

Transaction ID:

Unitemized contributions are received from various members of Local 322. No individuals made contributions that in the aggregate exceed the unitemized threshold.
