

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 lines COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

ADDRESS (number and street) 6447 TORRESDALE AVENUE PHILADELPHIA PA 19135

2. FEC IDENTIFICATION NUMBER C00125534 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2006 through 09 30 2006

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 Michael O'Malley Signature of Treasurer Electronically Filed by Michael O'Malley Date 10 10 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		45521.83
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	44390.86									
(c) Total Receipts (from Line 19)	30531.35	82935.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	74922.21	128457.40								
7. Total Disbursements (from Line 31)	10050.00	63585.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	64872.21	64872.21								
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**

Write or Type Committee Name

COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	30531.35	82935.57
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30531.35	82935.57
(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)	30531.35	82935.57
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))	30531.35	82935.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30531.35	82935.57

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)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	9261.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	9261.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1550.00	1550.00
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.....	8500.00	52773.85
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))..	10050.00	63585.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10050.00	63585.19

DETAILED SUMMARY PAGE
of Disbursements

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)	30531.35	82935.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30531.35	82935.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	9261.34
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	9261.34

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. Various Members		Date of Receipt
Mailing Address 6447 Torresdale Avenue		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>
City Philadelphia	State PA	Zip Code 19125
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11A1.4607
Name of Employer Roofers Local Union #30		Amount of Each Receipt this Period <input type="text" value="30531.35"/>
Occupation Roofers		Numerous cont. <\$400 individually
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="82935.57"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30531.35"/>
TOTAL This Period (last page this line number only)	<input type="text" value="30531.35"/>

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)

COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. Carney for Congress		Transaction ID: SB23.4589 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address PO Box A		Amount of Each Disbursement this Period 500.00
City Clarks Summit State PA Zip Code 18411	011 Category/ Type	
Purpose of Disbursement Contribution to federal candidate		
Candidate Name Carney for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carney for Congress		Transaction ID: SB23.4590 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO Box A		Amount of Each Disbursement this Period 500.00
City Clarks Summit State PA Zip Code 18411	011 Category/ Type	
Purpose of Disbursement Contribution to federal candidate		
Candidate Name Carney for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens for Charles Dertinger		Transaction ID: SB23.4591 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 8541 Delaware Drive		Amount of Each Disbursement this Period 500.00
City Bangor State PA Zip Code 18013	011 Category/ Type	
Purpose of Disbursement Contribution to federal candidate		
Candidate Name Citizens for Charles Dertinger		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

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 / 15

<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)

COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. Friends of Congressman Tim Holden

Mailing Address PO Box 37

City St. Clair State PA Zip Code 17970

Purpose of Disbursement
Contribution for federal candidate

Candidate Name
Friends of Congressman Tim Holden

Office Sought: House
 Senate
 President

State: PA District: 17

Disbursement For: 2006
 Primary General
 Other (specify) ▼

010
Category/
Type

Transaction ID: SB23.4592

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

1550.00

**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 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)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. B.U.I.L.D.		Transaction ID: SB29.4574 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6	
Mailing Address 5910 Harford Road		Amount of Each Disbursement this Period 500.00	
City Baltimore State PA Zip Code 21214	Purpose of Disbursement Contribution to non-federal candidate	011 Category/ Type	
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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Brennan for State Representative		Transaction ID: SB29.4600 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6	
Mailing Address 1201 Delaware Avenue		Amount of Each Disbursement this Period 500.00	
City Bethlehem State PA Zip Code 18015	Purpose of Disbursement Contribution of non-federal candidate	011 Category/ Type	
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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Briggs, Bunting & Dougherty, LLP		Transaction ID: SB29.4604 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6	
Mailing Address Two Penn Center Plaza, Suite 820		Amount of Each Disbursement this Period 2100.00	
City Philadelphia State PA Zip Code 19102	Purpose of Disbursement Accounting fees	001 Category/ Type	
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:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3100.00
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 / 15

<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)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. Gwendolyn Britt		Transaction ID: SB29.4562 Date of Disbursement MM / DD / YYYY 07 / 13 / 2006	
Mailing Address 7400 Parkwood Street		Amount of Each Disbursement this Period 100.00	
City Landover State MD Zip Code 20784	Purpose of Disbursement Contribution to non-federal candidate Candidate Name	011 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) ▼		

Full Name (Last, First, Middle Initial) B. Roy P Dyson		Transaction ID: SB29.4568 Date of Disbursement MM / DD / YYYY 07 / 13 / 2006	
Mailing Address 45920 Harbor Lanee		Amount of Each Disbursement this Period 100.00	
City Lexington Park State MD Zip Code 20653	Purpose of Disbursement Contribution to non-federal candidate Candidate Name	011 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) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Dereck Davis		Transaction ID: SB29.4554 Date of Disbursement MM / DD / YYYY 07 / 13 / 2006	
Mailing Address 6703 Halleck Street		Amount of Each Disbursement this Period 100.00	
City District Heights State MD Zip Code 20747	Purpose of Disbursement Contribution to non-federal candidate Candidate Name	011 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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. Friends of Jennifer Mann		Transaction ID: SB29.4602 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 1881		Amount of Each Disbursement this Period 500.00
City Allentown State PA Zip Code 18105-1881	Purpose of Disbursement Contribution to non-federal candidate 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) ▼
Purpose of Disbursement Contribution to non-federal candidate Candidate Name		

Full Name (Last, First, Middle Initial) B. Friends of John Donoghue		Transaction ID: SB29.4556 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 13109 Hepplewhite Circle		Amount of Each Disbursement this Period 100.00
City Haerstown State MD Zip Code 21742	Purpose of Disbursement Contribution to non-federal candidate 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) ▼
Purpose of Disbursement Contribution to non-federal candidate Candidate Name		

Full Name (Last, First, Middle Initial) C. Friends of Peter Franchot		Transaction ID: SB29.4558 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 910 Newhall Street		Amount of Each Disbursement this Period 100.00
City Silver Spring State MD Zip Code 20901	Purpose of Disbursement Contribution to non-federal candidate 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) ▼
Purpose of Disbursement Contribution to non-federal candidate Candidate Name		

SUBTOTAL of Disbursements This Page (optional) ▶	700.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. Friends of Sue Hecht		Transaction ID: SB29.4560 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 3915		Amount of Each Disbursement this Period 100.00
City Frederick State MD Zip Code 21705	Purpose of Disbursement Contribution to non-federal candidate 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) ▼	Category/Type 011

Full Name (Last, First, Middle Initial) B. Gloucester Co. Democratic Committee		Transaction ID: SB29.4595 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address P.O. Box 751		Amount of Each Disbursement this Period 2000.00
City Woodbury State NJ Zip Code 08096	Purpose of Disbursement Contribution to non-federal candidate 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Mac Middleton		Transaction ID: SB29.4566 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 6
Mailing Address 9170 Crescent Lane		Amount of Each Disbursement this Period 100.00
City La Plata State MD Zip Code 20646	Purpose of Disbursement Contribution to non-federal candidate 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) ▼	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	2200.00
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)

<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)
COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

Full Name (Last, First, Middle Initial) A. P.L.A.N.		Transaction ID: SB29.4593 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 800 N. Third Street Fourth Floor		Amount of Each Disbursement this Period 200.00
City Harrisburg State PA Zip Code 17102	Purpose of Disbursement Contribution for non-federal candidate 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. P.L.A.N.		Transaction ID: SB29.4594 Date of Disbursement MM / DD / YYYY 09 / 28 / 2006
Mailing Address 800 N. Third Street Fourth Floor		Amount of Each Disbursement this Period 1000.00
City Harrisburg State PA Zip Code 17102	Purpose of Disbursement Contribution for non-federal candidate 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pennsylvania AFL-CIO COPE		Transaction ID: SB29.4598 Date of Disbursement MM / DD / YYYY 08 / 29 / 2006
Mailing Address 231 State Street 7th Floor		Amount of Each Disbursement this Period 100.00
City Harrisburg State PA Zip Code 17101-1110	Purpose of Disbursement Contribution of non-federal candidate 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) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1300.00
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)

<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)

COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

<p>A. Full Name (Last, First, Middle Initial) Tom Perez</p>		<p>Transaction ID: SB29.4572 Date of Disbursement</p>	
<p>Mailing Address 1005 Houston Avenue</p>		<p><input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2006"/></p>	
<p>City Silver Spring</p>	<p>State MD</p>	<p>Zip Code 20912</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Contribution to non-federal candidate</p>		<p><input type="text" value="011"/> Category/ Type</p>	<p><input type="text" value="100.00"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>B. Full Name (Last, First, Middle Initial) Jeanette Rishell</p>		<p>Transaction ID: SB29.4564 Date of Disbursement</p>	
<p>Mailing Address P.O. Box 2174</p>		<p><input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2006"/></p>	
<p>City Manassas</p>	<p>State VA</p>	<p>Zip Code 20108</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Contribution to non-federal candidate</p>		<p><input type="text" value="011"/> Category/ Type</p>	<p><input type="text" value="100.00"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>C. Full Name (Last, First, Middle Initial) The Committee to Elect John Bohanan, Jr.</p>		<p>Transaction ID: SB29.4551 Date of Disbursement</p>	
<p>Mailing Address 44752 Green Acres Lane</p>		<p><input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/></p>	
<p>City California</p>	<p>State MD</p>	<p>Zip Code 20619</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Contribution to non-federal can</p>		<p><input type="text" value="011"/> Category/ Type</p>	<p><input type="text" value="100.00"/></p>
<p>Candidate Name</p>			
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: District:</p>			

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="300.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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 / 15

<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)

COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND

<p>A. Shirley Thompson</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 307b Nain Court</p> <p>City Marlboro State MD Zip Code 20774</p> <p>Purpose of Disbursement Contribution to non-federal candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB29.4570</p> <p>Date of Disbursement</p> <p>07 / 13 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>100.00</p> <p>011 Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>B. Washington Twp. Democratic Exec. Committee</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P.O. Box 8729</p> <p>City Turnersville State NJ Zip Code 08012</p> <p>Purpose of Disbursement Contribution of to non-federal candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB29.4596</p> <p>Date of Disbursement</p> <p>08 / 29 / 2006</p> <p>Amount of Each Disbursement this Period</p> <p>500.00</p> <p>011 Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

8500.00