

# 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

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

ADDRESS (number and street) 1750 New York Ave. NW

Suite 400

Check if different than previously reported. (ACC) Washington DC 20006

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00027359

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:
- |                                      |                                      |  |  |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)             | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)             | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input checked="" type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2007 through 09 30 2007

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 Walter, Wise

Signature of Treasurer Electronically Filed by Walter, Wise Date 10 15 2007

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							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers  
(IPAL)

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		267310.50
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	369198.88									
(c) Total Receipts (from Line 19) .....	104554.51	852440.93								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	473753.39	1119751.43								
<hr/> 7. Total Disbursements (from Line 31) .....	87070.88	733068.92								
<hr/> 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	386682.51	386682.51								
<hr/> 9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
<hr/> 10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers  
(IPAL)

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	1593.00	6081.50
(i) Itemized (use Schedule A) .....	102791.36	844991.00
(ii) Unitemized .....	104384.36	851072.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	104384.36	851072.50
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.) .....	170.15	1368.43
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)) .....	104554.51	852440.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	104554.51	852440.93

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	540.88	963.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	540.88	963.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54000.00	564700.00
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.....	32530.00	167405.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	87070.88	733068.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	87070.88	733068.92

**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) .....	104384.36	851072.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	104384.36	851072.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	540.88	963.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	540.88	963.92

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
 SAM MARTINEZ

Mailing Address 28770 STEVENS AVENUE

City MORENO VALLEY State CA Zip Code 92555-8222

FEC ID number of contributing federal political committee. **C**

Name of Employer Int'l. Association of Iron Workers  
 Occupation Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 17 / 2007

**Transaction ID:** 26536938

Amount of Each Receipt this Period  
 390.00

**B.** Full Name (Last, First, Middle Initial)  
 ROBERT J. SPILLER

Mailing Address 425 FOREST AVE

City Houston State PA Zip Code 15342-1206

FEC ID number of contributing federal political committee. **C**

Name of Employer Int'l Assoc. of Iron Workers  
 Occupation Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556766

Amount of Each Receipt this Period  
 60.00

**C.** Full Name (Last, First, Middle Initial)  
 GORDON T. STRUSS

Mailing Address 851 PIERCE BUTLER ROUTE

City Saint Paul State MN Zip Code 55104-1634

FEC ID number of contributing federal political committee. **C**

Name of Employer Int'l Assoc. of Iron Workers  
 Occupation Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556768

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>510.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
 DAVID W. TURNBULL

Mailing Address 1801 ELM LANE

City State Zip Code  
 Okmulgee OK 74447-5424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 617.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556771

Amount of Each Receipt this Period  
 93.00

**B.** Full Name (Last, First, Middle Initial)  
 MANUEL P. VALENCIA

Mailing Address 853 BANOCK STREET

City State Zip Code  
 Spring Valley CA 91977-5206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556772

Amount of Each Receipt this Period  
 60.00

**C.** Full Name (Last, First, Middle Initial)  
 W W. WISE JR

Mailing Address 11704 Fox Glen Drive

City State Zip Code  
 Oakton VA 22124-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556778

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>213.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
 ROBERT BANKS

Mailing Address 388 COUNTRY WAY

City State Zip Code  
 SCITUATE MA 02066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l. Association of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556796

Amount of Each Receipt this Period  
 60.00

**B.** Full Name (Last, First, Middle Initial)  
 JOHN CEFALU

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l. Association of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556799

Amount of Each Receipt this Period  
 60.00

**C.** Full Name (Last, First, Middle Initial)  
 FREDERICK R. CLUKEY

Mailing Address 6399 CLOUGH PIKE, #14

City State Zip Code  
 Cincinnati OH 45244-3976

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 370.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556800

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
 MICHAEL COYNE

Mailing Address 129 CUMBERLAND ST.

City State Zip Code  
 HARTFORD CT 06106

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 Int'l. Association of Iron Workers

Occupation  
 Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556801

Amount of Each Receipt this Period  
 60.00

**B.** Full Name (Last, First, Middle Initial)  
 ERIC M. DEAN

Mailing Address 7736 WESTWOOD DRIVE

City State Zip Code  
 Elmwood Park IL 60707-1805

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 Int'l. Assoc. of Iron Workers

Occupation  
 Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556807

Amount of Each Receipt this Period  
 60.00

**C.** Full Name (Last, First, Middle Initial)  
 MICHAEL DOWNEY

Mailing Address 71 HARWOOD DRIVE

City State Zip Code  
 SPENCERPORT NY 14559

FEC ID number of contributing federal political committee. **C**

Name of Employer  
 INT'L. ASSOCIATION OF IRON WORKERS

Occupation  
 Ironworker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556808

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
 JAMES A. HATHMAN JR

Mailing Address 5249 WILSON

City State Zip Code  
 Saint Louis MO 63110-3137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556817

Amount of Each Receipt this Period  
 60.00

**B.** Full Name (Last, First, Middle Initial)  
 GREGORY E. HICKS

Mailing Address 229 WILLOW LANE

City State Zip Code  
 Linden MI 48451-9004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556820

Amount of Each Receipt this Period  
 30.00

**C.** Full Name (Last, First, Middle Initial)  
 JOHN HURLEY

Mailing Address 3 HART PLACE

City State Zip Code  
 SOUTH BOSTON MA 02127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l Association of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID:** 26556824

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
TADAS KICIELINSKI, W

Mailing Address 1750 NEW YORK AVE.

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Int'l. Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

**Transaction ID:** 26556825

Amount of Each Receipt this Period  
60.00

**B.** Full Name (Last, First, Middle Initial)  
DAVE KOLBE

Mailing Address 1750 NEW YORK AVENUE, NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INT'L. ASSOCIATION OF IRON WORKERS POLITICAL DIRECTOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

**Transaction ID:** 26556828

Amount of Each Receipt this Period  
120.00

**C.** Full Name (Last, First, Middle Initial)  
GEORGE KRATZER, E

Mailing Address 451 NUNN AVE.

City State Zip Code  
Wilmington OH 45177-1387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Int'l. Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2007

**Transaction ID:** 26556829

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>240.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 29
	(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"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

**A.** Full Name (Last, First, Middle Initial)  
Daniel Parker, S.

Mailing Address 110 Lake Winnemissett Dr.

City State Zip Code  
 Deland FL 32724-4839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l. Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID: 26556835**

Amount of Each Receipt this Period  
 60.00

**B.** Full Name (Last, First, Middle Initial)  
MARVIN L. RAGSDALE

Mailing Address 1830 COUNTY ROAD 289

City State Zip Code  
 Georgetown TX 78628-4049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Int'l. Assoc. of Iron Workers Ironworker

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2007

**Transaction ID: 26556845**

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1593.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 29	
	(check only one)			
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

A. Full Name (Last, First, Middle Initial)  
 Suntrust Bank MKT-Interest

Mailing Address 1750 New York Ave. NW

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1368.43

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2007

Transaction ID: 26620903

Amount of Each Receipt this Period  
 170.15

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.15
<b>TOTAL</b> This Period (last page this line number only) .....	▶	170.15

**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 / 29

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

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NAME OF COMMITTEE (In Full)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement

001  
Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 26512420

Date of Disbursement

09 / 10 / 2007

Amount of Each Disbursement this Period

52.88

Full Name (Last, First, Middle Initial)

**B. Suntrust**

Mailing Address 1750 NEW YORK AVENUE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement Federal Taxes (1120-POL)

001  
Category/  
Type

Candidate Name

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

State: District:

Transaction ID: 26512752

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

364.00

Federal Taxes (1120-POL)

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

416.88

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

416.88

**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 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. LEVIN FOR CONGRESS**

Mailing Address 230 N. AVENUE

City MOUNT CLEMENS State MI Zip Code 48043

Purpose of Disbursement U.S. HOUSE (MI)

Candidate Name SANDER LEVIN

Office Sought:  House  Senate  President

State: MI District: 12

Disbursement For: 2008  Primary  General  Other (specify) ▼

Transaction ID: 26510174

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

U.S. HOUSE (MI)

Full Name (Last, First, Middle Initial)

**B. Friends Of Phil Hare**

Mailing Address 499 South Capitol Street, SW Suite 412

City Washington State DC Zip Code 20003

Purpose of Disbursement U.S. HOUSE (MI)

Candidate Name Mr. Philip Hare

Office Sought:  House  Senate  President

State: IL District: 17

Disbursement For: 2008  Primary  General  Other (specify) ▼

Transaction ID: 26510137

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

5000.00

U.S. HOUSE (MI)

Full Name (Last, First, Middle Initial)

**C. AMERIPAC**

Mailing Address 499 SOUTH CAPITOL STREET, SW SUITE 414

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 26536357

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

2500.00

Federal Contribution

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

8500.00

**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 16 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<p><b>A. LANGEVIN FOR CONGRESS</b></p> <p>Full Name (Last, First, Middle Initial) LANGEVIN FOR CONGRESS</p> <p>Mailing Address 181-A KNIGHT STREET</p> <p>City WARWICK State RI Zip Code 02886</p> <p>Purpose of Disbursement U.S. House (RI)</p> <p>Candidate Name JIM LANGEVIN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: RI District: 2</p>		<p>Transaction ID: 26536374</p> <p>Date of Disbursement</p> <p>09 / 17 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>1000.00</p> <p>U.S. House (RI)</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>011</p>

<p><b>B. Van Hollen For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Van Hollen For Congress</p> <p>Mailing Address 10605 Concord St., Suite 202</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement U.S. HOUSE (MD)</p> <p>Candidate Name Chris Van Hollen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 8</p>		<p>Transaction ID: 26556973</p> <p>Date of Disbursement</p> <p>09 / 19 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>5000.00</p> <p>U.S. HOUSE (MD)</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p>011</p>

<p><b>C. Niki Tsongas for Congress</b></p> <p>Full Name (Last, First, Middle Initial) Niki Tsongas for Congress</p> <p>Mailing Address PO Box 1454</p> <p>City Lowell State MA Zip Code 01853</p> <p>Purpose of Disbursement U.S. HOUSE (MA-05)</p> <p>Candidate Name Nicola Tsongas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MA District: 5</p>		<p>Transaction ID: 26556970</p> <p>Date of Disbursement</p> <p>09 / 19 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>2500.00</p> <p>U.S. HOUSE (MA-05)</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Special-General</p>		<p>Category/Type</p> <p>011</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>8500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</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 17 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<p><b>A. Peters For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Peters For Congress</p> <p>Mailing Address PO Box 226</p> <p>City Bloomfield Hills State MI Zip Code 48303</p> <p>Purpose of Disbursement U.S. House (MI-09)</p> <p>Candidate Name Mr. Gary Peters</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 9</p>		<p>Transaction ID: 26615161</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>U.S. House (MI-09)</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p><b>B. Schauer For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Schauer For Congress</p> <p>Mailing Address PO Box 100</p> <p>City Battle Creek State MI Zip Code 49016</p> <p>Purpose of Disbursement U.S. House (MI-07)</p> <p>Candidate Name Mr. Mark Schauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 7</p>		<p>Transaction ID: 26615172</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>U.S. House (MI-07)</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p><b>C. BERKLEY FOR CONGRESS</b></p> <p>Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS</p> <p>Mailing Address 1210 S. VALLEY VIEW BLVD. STE. 114</p> <p>City LAS VEGAS State NV Zip Code 89102</p> <p>Purpose of Disbursement U.S. House (NV)</p> <p>Candidate Name Shelley Berkley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NV District: 1</p>		<p>Transaction ID: 26615679</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>U.S. House (NV)</p>
<p>Disbursement For: 2008</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="011"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="15000.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></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)

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC SENATORIAL CAMPAIGN COMM.**

Mailing Address 430 SOUTH CAPITOL STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 26615689

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

5000.00

FEDERAL CONTRIBUTION

**B. HOOSIERS FOR HILL**

Mailing Address P. O. BOX 1071

City SEYMOUR State IN Zip Code 47274

Purpose of Disbursement  
U.S. House (IN)

Candidate Name  
BARON HILL

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IN District: 9

Transaction ID: 26615676

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2000.00

U.S. House (IN)

**C. HOOSIERS FOR HILL**

Mailing Address P. O. BOX 1071

City SEYMOUR State IN Zip Code 47274

Purpose of Disbursement  
U.S. House (IN)

Candidate Name  
BARON HILL

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: IN District: 9

Transaction ID: 26615687

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

500.00

U.S. House (IN)

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

7500.00

**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 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<p><b>A. JAY INSLEE FOR CONGRESS</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>JAY INSLEE FOR CONGRESS</p> <p>Mailing Address 303 MASSACHUSETTS AVENUE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement U.S. House (WA)</p> <p>Candidate Name JAY INSLEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District: 1</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 26615685</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>U.S. House (WA)</p>
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<p><b>B. Joe Donnelly For Congress</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Joe Donnelly For Congress</p> <p>Mailing Address 135 S. Lafayette Boulevard</p> <p>City South Bend State IN Zip Code 46601</p> <p>Purpose of Disbursement U.S. House (IN)</p> <p>Candidate Name Mr. Joseph Donnelly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 2</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 26615485</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>U.S. House (IN)</p>
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<p><b>C. Jim Costa For Congress</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Jim Costa For Congress</p> <p>Mailing Address 2037 W. Bullard Avenue PMB #355</p> <p>City Fresno State CA Zip Code 93711</p> <p>Purpose of Disbursement U.S. House (CA)</p> <p>Candidate Name Mr. Jim Costa</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 20</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 26615678</b></p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>U.S. House (CA)</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="8500.00"/></p>
<p><b>TOTAL</b> 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 20 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<b>A. James Webb For Us Senate</b> Full Name (Last, First, Middle Initial) James Webb For Us Senate Mailing Address 426 C Street, NE City Washington State DC Zip Code 20002 Purpose of Disbursement U.S. Senate (VA) Candidate Name Mr. James Webb Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 26615683</b> Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 5000.00 U.S. Senate (VA)
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<b>B. John Sarbanes For Congress</b> Full Name (Last, First, Middle Initial) John Sarbanes For Congress Mailing Address PO Box 6854 City Towson State MD Zip Code 21285 Purpose of Disbursement U.S. House (MD) Candidate Name Rep. John Sarbanes Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 3 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 26615490</b> Date of Disbursement 09 / 27 / 2007 Amount of Each Disbursement this Period 1000.00 U.S. House (MD)
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**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6000.00

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

54000.00

**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

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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. Campaign to Elect Wallace Barnes**

Mailing Address 220 Seal Avenue

City Biloxi State MS Zip Code 39530

Purpose of Disbursement  
Void - Campaign to Elect Wallace Barnes

Candidate Name  
Wallace Barnes

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: MS District: 11

Transaction ID: 26493714

Date of Disbursement

09 / 06 / 2007

Amount of Each Disbursement this Period

-250.00

Void - Campaign to Elect Wallace Barnes

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO RE-ELECT BUTCH ANDERSON**

Mailing Address 84 SOUTH RANDOLPH AVENUE

City POUGHKEEPSIE State NY Zip Code 12601

Purpose of Disbursement  
BUTCH ANDERSON, SHERIFF 00 NY

Candidate Name  
BUTCH ANDERSON

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: NY District: 0

Transaction ID: 26510124

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

1500.00

BUTCH ANDERSON, SHERIFF 00 NY

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF SEAMUS MCCAFFERY**

Mailing Address P.O. BOX 6196

City PHILADELPHIA State PA Zip Code 19116

Purpose of Disbursement  
SEAMUS MCCAFFERY, JUSTICE OF THE SUPREME

Candidate Name  
SEAMUS MCCAFFERY

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: PA District:

Transaction ID: 26510106

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

SEAMUS MCCAFFERY, JUSTICE OF THE SUPREME COURT PA

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

2250.00

**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)

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<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF SEAMUS MCCAFFERY**

Mailing Address P.O. BOX 6196

City PHILADELPHIA State PA Zip Code 19116

Purpose of Disbursement SEAMUS MCCAFFERY, JUSTICE OF THE SUPREME

Candidate Name SEAMUS MCCAFFERY

Office Sought:  House  Senate  President

Disbursement For: 2007  Primary  General  Other (specify) ▼

State: PA District:

Transaction ID: 26510107

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

2500.00

SEAMUS MCCAFFERY, JUSTICE OF THE SUPREME COURT PA

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Saylor Retention 07**

Mailing Address c/o Joshua Bloom and Associates, P  
1230 Grant Building, 310 Grant Str

City Pittsburgh State PA Zip Code 15219

Purpose of Disbursement Thomas Saylor, JUSTICE OF THE SUPREME CO

Candidate Name Thomas Saylor

Office Sought:  House  Senate  President

Disbursement For: 2007  Primary  General  Other (specify) ▼

State: PA District:

Transaction ID: 26509914

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

2500.00

Thomas Saylor, JUSTICE OF THE SUPREME COURT PA

011  
Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Debra Todd for Justice Committee**

Mailing Address P.O. Box 42452

City Pittsburgh State PA Zip Code 15203

Purpose of Disbursement Debra Todd, JUSTICE OF THE SUPREME COURT

Candidate Name Debra Todd

Office Sought:  House  Senate  President

Disbursement For: 2007  Primary  General  Other (specify) ▼

State: PA District:

Transaction ID: 26510108

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

Debra Todd, JUSTICE OF THE SUPREME COURT PA

011  
Category/  
Type

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

6000.00

**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 23 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<p><b>A. Debra Todd for Justice Committee</b></p> <p>Full Name (Last, First, Middle Initial) Debra Todd for Justice Committee</p> <p>Mailing Address P.O. Box 42452</p> <p>City Pittsburgh State PA Zip Code 15203</p> <p>Purpose of Disbursement Debra Todd, JUSTICE OF THE SUPREME COURT</p> <p>Candidate Name Debra Todd</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:</p>		<p>Transaction ID: 26510109</p> <p>Date of Disbursement 09 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Debra Todd, JUSTICE OF THE SUPREME COURT PA</p>
<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>B. Friends of Tim Kennedy</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Tim Kennedy</p> <p>Mailing Address P.O. Box 73</p> <p>City Buffalo State NY Zip Code 14220</p> <p>Purpose of Disbursement Tim Kennedy, COUNTY LEGISLATOR 2nd NY</p> <p>Candidate Name Tim Kennedy</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 2</p>		<p>Transaction ID: 26512436</p> <p>Date of Disbursement 09 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Tim Kennedy, COUNTY LEGISLATOR 2nd NY</p>
<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>C. Friends of Chris Cerone</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Chris Cerone</p> <p>Mailing Address 44 Bingham Road</p> <p>City Marlboro State NY Zip Code 12452</p> <p>Purpose of Disbursement Chris Cerone, TOWN SUPERVSOR NY</p> <p>Candidate Name Chris Cerone</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:</p>		<p>Transaction ID: 26522515</p> <p>Date of Disbursement 09 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Chris Cerone, TOWN SUPERV-SOR NY</p>
<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>4000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</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)

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<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF CHUCK HOSKIN 2008**

Mailing Address P. O. BOX 941

City VINITA State OK Zip Code 74301

Purpose of Disbursement  
CHUCK HOSKINS, STATE HOUSE 36th OK

Candidate Name  
CHUCK HOSKINS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OK District: 36

Transaction ID: 26536444

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

5000.00

CHUCK HOSKINS, STATE HOUSE  
36th OK

Full Name (Last, First, Middle Initial)

**B. Gordon Morgan Campaign**

Mailing Address 5920 Carribean Drive, South

City Jacksonville State FL Zip Code 32277

Purpose of Disbursement  
Gordon Morgan, STATE HOUSE 17th FL

Candidate Name  
Gordon Morgan

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: FL District: 17

Transaction ID: 26536365

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Gordon Morgan, STATE HOUSE  
17th FL

Full Name (Last, First, Middle Initial)

**C. Cindy Wale Campaign Fund**

Mailing Address 9417 Prince Charles

City Denham Springs State LA Zip Code 70726

Purpose of Disbursement  
Cindy Wale, PARISH COUNCIL 3rd LA

Candidate Name  
Cindy Wale

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: LA District: 3

Transaction ID: 26536387

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Cindy Wale, PARISH COUNCIL  
3rd LA

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

6000.00

**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 25 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A.** Sonya Allen Campaign Fund

Mailing Address 116006 Cooper Allen Road

City Walker State LA Zip Code 70785

Purpose of Disbursement  
Sonya Allen, COUNCILMAN LA

Candidate Name  
Sonya Allen

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: LA District:

Transaction ID: 26536396

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

500.00

Sonya Allen, COUNCILMAN  
LA

Full Name (Last, First, Middle Initial)

**B.** Foster Campbell for Governor

Mailing Address P.O. Box 2007

City Shreveport State LA Zip Code 71166

Purpose of Disbursement  
Foster Campbell, GOVERNOR LA

Candidate Name  
Foster Campbell

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: LA District:

Transaction ID: 26536402

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

5000.00

Foster Campbell, GOVERNOR  
LA

Full Name (Last, First, Middle Initial)

**C.** ANTHONY C. 'TONY' HILL

Mailing Address P.O. BOX 40812

City JACKSONVILLE State FL Zip Code 32203

Purpose of Disbursement  
Anthony Hill, STATE SENATE 1st FL

Candidate Name  
Anthony C Hill

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: FL District: 1

Transaction ID: 26615493

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

500.00

Anthony Hill, STATE SENATE  
1st FL

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

6000.00

**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 26 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

<p><b>A. MITCH LANDRIEU CAMPAIGN FUND</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mitch Landrieu Campaign Fund</p> <p>Mailing Address P.O. BOX 20</p> <p>City NEW ORLEANS State LA Zip Code 70157</p> <p>Purpose of Disbursement MITCH LANDRIEU, LT. GOVERNOR LA</p> <p>Candidate Name MITCH LANDRIEU</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: LA District:</p>		<p><b>Transaction ID:</b> 26615475</p> <p>Date of Disbursement</p> <p>09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>2500.00</p> <p>011 Category/ Type</p> <p>MITCH LANDRIEU, LT. GOVERNOR LA</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>B. Friends to Elect George Zalar</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Friends to Elect George Zalar</p> <p>Mailing Address 1223 West Spruce Street</p> <p>City Coal Township State PA Zip Code 17866</p> <p>Purpose of Disbursement George Zalar, COUNTY COMMISSIONER PA</p> <p>Candidate Name George Zalar</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District:</p>		<p><b>Transaction ID:</b> 26615494</p> <p>Date of Disbursement</p> <p>09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>300.00</p> <p>011 Category/ Type</p> <p>George Zalar, COUNTY COMMISSIONER PA</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>C. Friends of Tom Muratore</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Friends of Tom Muratore</p> <p>Mailing Address P.O. Box 100</p> <p>City Bohemia State NY Zip Code 11716</p> <p>Purpose of Disbursement Tom Muratore, COUNTY LEGISLATOR 4th NY</p> <p>Candidate Name Tom Muratore</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 4</p>		<p><b>Transaction ID:</b> 26615636</p> <p>Date of Disbursement</p> <p>09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>625.00</p> <p>011 Category/ Type</p> <p>Tom Muratore, COUNTY LEGISLATOR 4th NY</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>3425.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</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 27 / 29

<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A.** Dwayne J. Munch Campaign Fund

Mailing Address 162 Louisiana Street

City Westwego State LA Zip Code 70094

Purpose of Disbursement Dwayne Munch, CHIEF OF POLICE LA

Candidate Name Dwayne Munch

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼

State: LA District:

Transaction ID: 26615476

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

300.00

Dwayne Munch, CHIEF OF POLICE LA

Full Name (Last, First, Middle Initial)

**B.** Friends of Ed Hatem

Mailing Address P.O. Box 835

City Long Beach State MS Zip Code 39560

Purpose of Disbursement Ed Hatem, STATE HOUSE 120th MS

Candidate Name Ed Hatem

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼

State: MS District: 12

Transaction ID: 26615478

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

250.00

Ed Hatem, STATE HOUSE 120th MS

Full Name (Last, First, Middle Initial)

**C.** Team Healy Committee

Mailing Address 501 52nd Street

City Canton State OH Zip Code 44709

Purpose of Disbursement William Healy, MAYOR OH

Candidate Name William Healy

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼

State: OH District:

Transaction ID: 26615484

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

2500.00

William Healy, MAYOR OH

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

3050.00

**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)

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<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)

Int'l. Association of Bridge, Structural, Ornamental & Reinforcing Iron Workers (IPAL)

Full Name (Last, First, Middle Initial)

**A.** Friends of Munchak & Cordaro

Mailing Address 116 North Washington Avenue  
Kane Building, Suite 1E

City State Zip Code  
Scranton PA 18503

Purpose of Disbursement  
A.J. Munchak, COUNTY COMMISSIONER PA

Candidate Name  
A.J. Munchak

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: PA District:

Transaction ID: 26615488

Date of Disbursement

/  /

Amount of Each Disbursement this Period

A.J. Munchak, COUNTY COMMISSIONER PA

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

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

Form/Schedule: **F3XN**

Transaction ID:

Regarding Line 11(a)(ii) of the Detailed Summary Page, all unitemized receipts from individuals/persons other than political committees, none of these receipts was from a single source that aggregate greater than \$200 in the calendar year. When receipts do aggregate greater than \$200 from a single source in a calendar year we itemize these receipts on Schedule A supporting Line 11(a)(i).