

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Espailat for Congress

ADDRESS (number and street)

210 Sherman Avenue

Suite B

Check if different than previously reported. (ACC)

New York

NY

10034

2. FEC IDENTIFICATION NUMBER ▼

C C00518365

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

13

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 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Mr. Rafael Lantigua

Signature of Treasurer Mr. Rafael Lantigua

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Espallat for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6741.00	10941.00
(b) Total Contribution Refunds (from Line 20(d))	2500.00	13050.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4241.00	-2109.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3075.05	3846.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3075.05	3846.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6137.16	
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).....	96445.66	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Espallat for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5950.00	10050.00
(ii) Unitemized.....	791.00	891.00
(iii) TOTAL of contributions from individuals ▶	6741.00	10941.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6741.00	10941.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	442.92
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6741.00	11383.92

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3075.05	3846.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2500.00	13050.00
(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 20(a), (b), and (c)).....	2500.00	13050.00
21. OTHER DISBURSEMENTS	1900.00	1900.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7475.05	18796.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6871.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6741.00
25. SUBTOTAL (add Line 23 and Line 24).....	13612.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7475.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6137.16

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

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

FOR LINE NUMBER: PAGE 5 OF 33
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Marisol Alcantara

Mailing Address 51 Hamilton Pl
Apt 64

City State Zip Code
New York NY 10031-6853

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

Name of Employer Occupation
NYS Nurses Association Program Rep

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VNJ3JDP5Y09

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Grace Cedeno

Mailing Address 33 Buckingham Dr

City State Zip Code
Ramsey NJ 07446-2607

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : VNJ3JDP5TK9

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Alexandro A. Damiron

Mailing Address 1 Gustavo Levy Place

City State Zip Code
New York NY 10029

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

Name of Employer Occupation
Mount Sinai Hospital Manager, Health System Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VNJ3JDP5YT4

Amount of Each Receipt this Period
1000.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Fernando Ferrer

Mailing Address

City State Zip Code
Bronx NY 10463

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

Name of Employer Occupation
Mercy College Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : VNJ3JDP6207

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Charles Gold

Mailing Address 330 W 72nd St
9G

City State Zip Code
New York NY 10023-2641

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

Name of Employer Occupation
Broadway Vision Center Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : VNJ3JDP5B65

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Desiree Sanchez

Mailing Address 1 Gustave L Levy Pl

City State Zip Code
New York NY 10029-6504

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VNJ3JDP5YW0

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Carmen Suardy

Mailing Address 582 4th St

City State Zip Code
Brooklyn NY 11215-3009

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

Name of Employer Occupation
NYU Langone Medical Center VP Employment & Labor Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : VNJ3JDP6230

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Paul H Tallaj

Mailing Address 25 Clarkson Ct

City State Zip Code
Paramus NJ 07652-5505

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

Name of Employer Occupation
Self Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2015

Transaction ID : VNJ3JDP5W52

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2350.00

5950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. 112 Dyckman Restaurant			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2015	
Mailing Address 112 Dyckman St			Amount of Each Disbursement this Period 625.05	
City New York	State NY	Zip Code 10040-1001	Transaction ID : VNH4A9YPD77	
Purpose of Disbursement venue for fundraiser		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NGP Van Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2015	
Mailing Address 1101 15th St NW			Amount of Each Disbursement this Period 2200.00	
City Washington	State DC	Zip Code 20005-5002	Transaction ID : VNH4A9YPD83	
Purpose of Disbursement campaign filing system Oct - March		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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:				

SUBTOTAL of Disbursements This Page (optional).....	2825.05
TOTAL This Period (last page this line number only).....	2825.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Rodolfo Fuyertes		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 1221 Fteley Ave		Amount of Each Disbursement this Period 2500.00
City Bronx	State NY	
Zip Code 10472-4403	Purpose of Disbursement refund primary over limit	Transaction ID : VNH4A9YP7T3
Candidate Name	Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 33	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Paul Gagliardi		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 21 Centre St		Amount of Each Disbursement this Period 1900.00 Transaction ID : VNH4A9YP842
City Bronx	State NY	
Zip Code 10464-1522	Purpose of Disbursement refund general election contribution	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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:	

SUBTOTAL of Disbursements This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	1900.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sm-Ali Amanollahi	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA707	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dennie Beach	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 1760 2nd Ave Apt 22C	
City State Zip Code New York NY 10128-5396	

Outstanding Balance Beginning This Period 350.00	Transaction ID : VNF5T9HA6S3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 350.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ravenel Boykin Curry IV	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 106 Central Park S Apt 27A	
City State Zip Code New York NY 10019-1578	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA6Y1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

1) SUBTOTALS This Period This Page (optional)	5550.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA707

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6S3

general election contribution to be refunded

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6Y1

general election contribution to be refunded

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Angel Cardenas

Nature of Debt (Purpose):
excessive (general election) contribution

Mailing Address 1299 Corporate Dr
Apt 1505

City State Zip Code
Westbury NY 11590-6650

Outstanding Balance Beginning This Period

100.00

Transaction ID : VNF5T9HA6M4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
William S. Friedman

Nature of Debt (Purpose):
excessive (general election) contribution

Mailing Address 320 Central Park W
Apt 18B

City State Zip Code
New York NY 10025-7659

Outstanding Balance Beginning This Period

500.00

Transaction ID : VNF5T9HA722

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paul Gagliardi

Nature of Debt (Purpose):
excessive (general election) contribution

Mailing Address 21 Centre St

City State Zip Code
Bronx NY 10464-1522

Outstanding Balance Beginning This Period

2600.00

Transaction ID : VNF5T9HA6W5

Amount Incurred This Period

0.00

Payment This Period

1900.00

Outstanding Balance at Close of This Period

700.00

1) **SUBTOTALS** This Period This Page (optional) ▶

1300.00

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6M4

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA722

general election contribution to be refunded

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6W5

general election contribution to be refunded

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cecilia Kemble

Nature of Debt (Purpose):
excessive (general election) contribution

Mailing Address 106 Central Park S
Apt 27A

City State Zip Code
New York NY 10019-1578

Outstanding Balance Beginning This Period

2600.00

Transaction ID : VNF5T9HA6P0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Metro Strategies

Nature of Debt (Purpose):
palmcards (East Harlem, Bronx, Base)

Mailing Address 5030 Broadway
Ste 807

City State Zip Code
New York NY 10034-1666

Outstanding Balance Beginning This Period

13319.82

Transaction ID : VNF5T9HAV26

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13319.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Metro Strategies

Nature of Debt (Purpose):
GOTV literature (palmcards, posters)

Mailing Address 5030 Broadway
Ste 807

City State Zip Code
New York NY 10034-1666

Outstanding Balance Beginning This Period

6871.82

Transaction ID : VNF5T9HAV18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6871.82

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

22791.64

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6P0

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HAV26

inv. 621

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HAV18

inv. 622 GOTV

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mirram Group LLC	Nature of Debt (Purpose): Survey/Ad
Mailing Address 5030 Broadway Ste 807	
City State Zip Code New York NY 10034-1666	

Outstanding Balance Beginning This Period 11000.00	Transaction ID : VNF5T9H9M56	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mirram Group LLC	Nature of Debt (Purpose): automated calls
Mailing Address 5030 Broadway Ste 807	
City State Zip Code New York NY 10034-1666	

Outstanding Balance Beginning This Period 2119.44	Transaction ID : VNF5T9HAEZ7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2119.44

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mirram Group LLC	Nature of Debt (Purpose): automated calls
Mailing Address 5030 Broadway Ste 807	
City State Zip Code New York NY 10034-1666	

Outstanding Balance Beginning This Period 2334.58	Transaction ID : VNF5T9HAF05	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2334.58

1) SUBTOTALS This Period This Page (optional)	15454.02
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HAEZ7

automated calls

Form/Schedule: SD10

Transaction ID: VNF5T9HAF05

automated calls

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cirilo Moronta	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 5 Markham Cir	
City State Zip Code Englewood NJ 07631-5039	

Outstanding Balance Beginning This Period 1400.00	Transaction ID : VNF5T9HA6Q7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dario A Oleaga	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 48 Hillcrest Ave	
City State Zip Code Yonkers NY 10705-1614	

Outstanding Balance Beginning This Period 2400.00	Transaction ID : VNF5T9HA6R5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bernardo Pena	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 280 Renfrew St	
City State Zip Code Methuen MA 01844-4701	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA730	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

1) SUBTOTALS This Period This Page (optional)	6400.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6Q7

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6R5

general election contribution to be refunded

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA730

over limit contribution to be refunded

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jona S Rechnitz	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 747 3rd Ave	
City State Zip Code New York NY 10017-2803	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : VNF5T9HA6V9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Red Horse Strategies	Nature of Debt (Purpose): primary day field operation
Mailing Address 55 Washington St Ste 624	
City State Zip Code Brooklyn NY 11201-1062	

Outstanding Balance Beginning This Period 22000.00	Transaction ID : VNF5T9HA756	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Teodoro Regus	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 321 Concord Rd	
City State Zip Code Yonkers NY 10710-1848	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA714	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

1) SUBTOTALS This Period This Page (optional)	29600.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6V9

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA756

canvas / field operation primary day

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA714

general election contribution to be refunded

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONATHAN REZNICK	Nature of Debt (Purpose): digital consulting (may)
Mailing Address 1911 Willow Creek Dr Apt 202	
City State Zip Code Austin TX 78741-4425	

Outstanding Balance Beginning This Period 1250.00	Transaction ID : VNF5T9HAV01	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Richard Simon	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 1550 S Indiana Ave	
City State Zip Code Chicago IL 60605-2857	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA6Z9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Elizabeth Smith	Nature of Debt (Purpose): communication services
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period 6000.00	Transaction ID : VNF5T9HA748	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00

1) SUBTOTALS This Period This Page (optional)	9850.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HAV01

professional services around website, digital media.

Form/Schedule: SD10

Transaction ID: VNF5T9HA6Z9

general election contribution to be refunded2

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA748

communication services

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 33
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bernard Spitzer	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 730 5th Ave	
City State Zip Code New York NY 10019-4105	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA6N2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eliot Spitzer	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 730 5th Ave Fl 22	
City State Zip Code New York NY 10019-4105	

Outstanding Balance Beginning This Period 2400.00	Transaction ID : VNF5T9HA6T1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pedro Zamora	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 9517 32nd Ave	
City State Zip Code East Elmhurst NY 11369-1849	

Outstanding Balance Beginning This Period 500.00	Transaction ID : VNF5T9HA6X3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) SUBTOTALS This Period This Page (optional)	5500.00
2) TOTALS This Period (last page this line number only)	96445.66
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	96445.66

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6N2

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6T1

general election contribution to be refunded

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6X3

general election contribution to be refunded

Form/Schedule:

Transaction ID: