

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="678930.10"/>	<input type="text" value="678930.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="678930.10"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2712324.34"/>	<input type="text" value="2712324.34"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3391254.44"/>	<input type="text" value="3391254.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1092161.76"/>	<input type="text" value="1092161.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2299092.68"/>	<input type="text" value="2299092.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="12642.00"/>	

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

VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 2015

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		
(i) Itemized (use Schedule A).....	29791.65	29791.65
(ii) Unitemized	2682177.02	2682177.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2711968.67	2711968.67
(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)	2711968.67	2711968.67
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.).....	355.67	355.67
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 Transfers (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))..... ▶	2712324.34	2712324.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2712324.34	2712324.34

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	370.00	370.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	370.00	370.00
22. Transfers to Affiliated/Other Party Committees.....	880000.00	880000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	211791.76	211791.76
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	1092161.76	1092161.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1092161.76	1092161.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2711968.67	2711968.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2711968.67	2711968.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	370.00	370.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	370.00	370.00

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

Form/Schedule: F3XN
Transaction ID :

Unless otherwise stated, there is no coordination with Federal candidates. VOTE/COPE does not conduct fund raising activities for Federal Candidates. NYSUT does not make any payments for stipends from petty cash. Also, this report includes regularly occurring administrative expenses paid by due date (CFR 104.11B).

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. LENA ACKERMAN		Date of Receipt
Mailing Address 210 INDEPENDENCE WAY		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
MORGANVILLE	NJ	07751
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NYSUT	ATTORNEY	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) B. LENA ACKERMAN		Date of Receipt
Mailing Address 210 INDEPENDENCE WAY		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
MORGANVILLE	NJ	07751
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NYSUT	ATTORNEY	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

Full Name (Last, First, Middle Initial) C. KEVIN R AHERN		Date of Receipt
Mailing Address 122 RAMSEY AVE		<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City	State	Zip Code
SYRACUSE	NY	13224
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Syracuse T A Inc	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. KEVIN R AHERN			Date of Receipt
Mailing Address 122 RAMSEY AVE			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31516
SYRACUSE	NY	13224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="200.00"/>
Name of Employer	Occupation		
Syracuse T A Inc	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KAREN ALFORD			Date of Receipt
Mailing Address 10572 AVENUE L			<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31517
BROOKLYN	NY	11236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="231.50"/>
Name of Employer	Occupation		
United Fed. Tchrs.	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="231.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. KAREN ALFORD			Date of Receipt
Mailing Address 10572 AVENUE L			<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31518
BROOKLYN	NY	11236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="46.30"/>
Name of Employer	Occupation		
United Fed. Tchrs.	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="277.80"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="297.80"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. CARMEN M ALVAREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 BELL BLVD APT 3C
 City BAYSIDE State NY Zip Code 11360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31519
 Amount of Each Receipt this Period
 231.50

B. CARMEN M ALVAREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2335 BELL BLVD APT 3C
 City BAYSIDE State NY Zip Code 11360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31520
 Amount of Each Receipt this Period
 46.30

C. JANET R AXELROD
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 TERRACE AVE
 City ALBANY State NY Zip Code 12203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation FORMER OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31525
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 527.80
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. FLORENCE E BALDWIN		Date of Receipt
Mailing Address 42 PEACOCK LN		M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015
City	State	Zip Code
NORTH BABYLON	NY	11703
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31526
C		Amount of Each Receipt this Period
		500.00
Name of Employer	Occupation	
North Babylon Tch Or	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		500.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. RANDI S BERNSTEIN		Date of Receipt
Mailing Address 212 N WALNUT ST		M M M / D D D / Y Y Y Y Y Y 05 / 11 / 2015
City	State	Zip Code
N MASSAPEQUA	NY	11758
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31531
C		Amount of Each Receipt this Period
		200.44
Name of Employer	Occupation	
East Meadow T A	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		200.44
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LINDA M BEYER		Date of Receipt
Mailing Address 170 GYPSY LN		M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2015
City	State	Zip Code
EAST AURORA	NY	14052
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31532
C		Amount of Each Receipt this Period
		215.00
Name of Employer	Occupation	
Orchard Park T A	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		215.00
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	915.44
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. ANTOINETTE BLANCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 6TH AVE W
 City EAST NORTHPORT State NY Zip Code 11731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Un Teacher Northport Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31533
 Amount of Each Receipt this Period
 231.50

B. ANTOINETTE BLANCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 6TH AVE W
 City EAST NORTHPORT State NY Zip Code 11731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Un Teacher Northport Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31534
 Amount of Each Receipt this Period
 46.30

C. ANDREW D BOGEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 86 SOUTH ST
 City BOLIVAR State NY Zip Code 14715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BOLIVAR-RICHBURG FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31535
 Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 497.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 12 OF 106
(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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. COLIN M BRINSON
Full Name (Last, First, Middle Initial)
Mailing Address 43 DORSET DR

City BUFFALO	State NY	Zip Code 14223
-----------------	-------------	-------------------

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2015
Transaction ID : SA11AI.31538

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
201.55

Name of Employer: TA Cheektowaga-Sloan
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.55

B. COLIN M BRINSON
Full Name (Last, First, Middle Initial)
Mailing Address 43 DORSET DR

City BUFFALO	State NY	Zip Code 14223
-----------------	-------------	-------------------

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 09 / 2015
Transaction ID : SA11AI.31539

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
3.00

Name of Employer: TA Cheektowaga-Sloan
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.55

C. COLIN M BRINSON
Full Name (Last, First, Middle Initial)
Mailing Address 43 DORSET DR

City BUFFALO	State NY	Zip Code 14223
-----------------	-------------	-------------------

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2015
Transaction ID : SA11AI.31540

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
3.00

Name of Employer: TA Cheektowaga-Sloan
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.55

SUBTOTAL of Receipts This Page (optional)..... ▶ 207.55

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. CLAUDIA BURNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4170B BURNINGTREE RD
 City LIVERPOOL State NY Zip Code 13090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N Syracuse Educ Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2015
Transaction ID : SA11AI.31544
 Amount of Each Receipt this Period
 250.00

B. SUSAN D BURNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 BENEDICT ST
 City SARATOGA SPRINGS State NY Zip Code 12866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shenendehowa T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11AI.31546
 Amount of Each Receipt this Period
 20.00

C. SUSAN D BURNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 BENEDICT ST
 City SARATOGA SPRINGS State NY Zip Code 12866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shenendehowa T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31547
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. KRISTEN I CARTWRIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 KEVIN DR
 City BURNT HILLS State NY Zip Code 12027
 FEC ID number of contributing federal political committee. C
 Name of Employer BH Ballston Lk T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31551
 Amount of Each Receipt this Period
 590.00

B. Stacey CARUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1532 PERTH RD
 City HAGAMAN State NY Zip Code 12086
 FEC ID number of contributing federal political committee. C
 Name of Employer Amsterdam T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11AI.31552
 Amount of Each Receipt this Period
 205.00

c. Stacey CARUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1532 PERTH RD
 City HAGAMAN State NY Zip Code 12086
 FEC ID number of contributing federal political committee. C
 Name of Employer Amsterdam T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2015
Transaction ID : SA11AI.31553
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	820.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. Stacey CARUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1532 PERTH RD
 City HAGAMAN State NY Zip Code 12086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Amsterdam T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.31554
 Amount of Each Receipt this Period
 25.00

B. TRACEY E CIANFRINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 SWEET HOME ROAD
 City AMHERST State NY Zip Code 14228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sweet Home E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31559
 Amount of Each Receipt this Period
 264.00

C. TRACEY E CIANFRINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 SWEET HOME ROAD
 City AMHERST State NY Zip Code 14228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sweet Home E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31560
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 339.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. DEBORAH L COLLURA		Date of Receipt M M / D D / Y Y Y Y Y 06 / 12 / 2015 Transaction ID : SA11AI.31564	
Mailing Address 5803 FOREST CREEK DR		Amount of Each Receipt this Period 20.00	
City EAST AMHERST	State NY	Zip Code 14051	
FEC ID number of contributing federal political committee. C			
Name of Employer Williamsville TA, Inc.	Occupation TEACHER		
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) B. ARTHUR J COOKE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 28 / 2015 Transaction ID : SA11AI.31566	
Mailing Address 4113 169TH ST		Amount of Each Receipt this Period 25.00	
City FLUSHING	State NY	Zip Code 11358	
FEC ID number of contributing federal political committee. C			
Name of Employer Pt Washington T A	Occupation TEACHER		
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. ARTHUR J COOKE		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2015 Transaction ID : SA11AI.31567	
Mailing Address 4113 169TH ST		Amount of Each Receipt this Period 25.00	
City FLUSHING	State NY	Zip Code 11358	
FEC ID number of contributing federal political committee. C			
Name of Employer Pt Washington T A	Occupation TEACHER		
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	70.00

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

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

FOR LINE NUMBER: PAGE 17 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JASON COONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 71 CRESTWAY LN
 City ROCHESTER State NY Zip Code 14612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Greece Teachers Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2015
Transaction ID : SA11AI.31570
 Amount of Each Receipt this Period
 200.00

B. VANESSA I CRUZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 NORTH ST APT 103
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31929
 Amount of Each Receipt this Period
 220.00

C. VANESSA I CRUZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 NORTH ST APT 103
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31930
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JEANNE DALEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2026 ASHWOOD RUN
 City THE VILLAGES State FL Zip Code 32162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Newburgh T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2015
Transaction ID : SA11AI.31575
 Amount of Each Receipt this Period
 210.00

B. MICHAEL DEELY
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 FRONTENAC AVE
 City BUFFALO State NY Zip Code 14216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31577
 Amount of Each Receipt this Period
 20.00

C. MICHAEL DEELY
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 FRONTENAC AVE
 City BUFFALO State NY Zip Code 14216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31578
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. EVELYN DEJESUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 DIELEN LN
 City ELMONT State NY Zip Code 11003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31579
 Amount of Each Receipt this Period
 231.50

B. EVELYN DEJESUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 DIELEN LN
 City ELMONT State NY Zip Code 11003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31580
 Amount of Each Receipt this Period
 46.30

C. MICHAEL DELANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3625 S CREEK RD
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.31581
 Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 497.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 20 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL DELANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3625 S CREEK RD
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31582
 Amount of Each Receipt this Period
 60.00

B. GARY L DICLEMENTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 83 PINE ST
 City PORT JEFF STA State NY Zip Code 11776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer W. Suffolk BOCES FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31584
 Amount of Each Receipt this Period
 250.00

C. MELISSA A DORCHAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 OVERLOOK RD
 City WHITE PLAINS State NY Zip Code 10605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31585
 Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MELISSA A DORCHAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 OVERLOOK RD
 City WHITE PLAINS State NY Zip Code 10605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31586
 Amount of Each Receipt this Period
 40.00

B. PAUL G EGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 WASHBURNS LN
 City STONY POINT State NY Zip Code 10980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31587
 Amount of Each Receipt this Period
 231.50

C. PAUL G EGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 WASHBURNS LN
 City STONY POINT State NY Zip Code 10980
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31588
 Amount of Each Receipt this Period
 46.30

SUBTOTAL of Receipts This Page (optional).....▶	317.80
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 22 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAUL ELLIS-GRAHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 VANDERBILT DR
 City State Zip Code
 HIGHLAND MILLS NY 10930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Monroe Woodbury TA TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11AI.31589
 Amount of Each Receipt this Period
 210.00

B. PAUL ELLIS-GRAHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 VANDERBILT DR
 City State Zip Code
 HIGHLAND MILLS NY 10930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Monroe Woodbury TA TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31590
 Amount of Each Receipt this Period
 30.00

C. PAUL ELLIS-GRAHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 VANDERBILT DR
 City State Zip Code
 HIGHLAND MILLS NY 10930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Monroe Woodbury TA TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : SA11AI.31591
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. PAUL ELLIS-GRAHAM			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 03 / 2015 Transaction ID : SA11AI.31592		
Mailing Address 16 VANDERBILT DR			Amount of Each Receipt this Period 35.00		
City HIGHLAND MILLS	State NY	Zip Code 10930			
FEC ID number of contributing federal political committee. C					
Name of Employer Monroe Woodbury TA		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.00			

Full Name (Last, First, Middle Initial) B. PAUL ELLIS-GRAHAM			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 18 / 2015 Transaction ID : SA11AI.31593		
Mailing Address 16 VANDERBILT DR			Amount of Each Receipt this Period 35.00		
City HIGHLAND MILLS	State NY	Zip Code 10930			
FEC ID number of contributing federal political committee. C					
Name of Employer Monroe Woodbury TA		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00			

Full Name (Last, First, Middle Initial) C. PAULA M FARRELL			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 03 / 2015 Transaction ID : SA11AI.31597		
Mailing Address PO BOX 211			Amount of Each Receipt this Period 75.00		
City EDEN	State NY	Zip Code 14057			
FEC ID number of contributing federal political committee. C					
Name of Employer Eden Tchrs Assn		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	145.00

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

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

FOR LINE NUMBER: PAGE 24 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MARIA M FENTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2755 FOREST HILL DR
 City AUBURN State NY Zip Code 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Solvay T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31598
 Amount of Each Receipt this Period
 205.00

B. LAWRENCE FINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 SOUTHWEST PASS
 City GREENFIELD CENTER State NY Zip Code 12833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mohonasen Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11AI.31600
 Amount of Each Receipt this Period
 227.00

C. LINDSEY FINJER
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 STANFORD CT
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Great Neck T A Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31603
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 452.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 25 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. STEVEN FINSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 342 W 89TH ST # 2
 City NEW YORK State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Rochelle F.U.S.E Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31605
 Amount of Each Receipt this Period
 200.00

B. CLIFF FOLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 SHORT CT
 City WAPPINGERS FALLS State NY Zip Code 12590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wappngrs Cong Of TCH Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31606
 Amount of Each Receipt this Period
 300.00

C. MICHAEL R FOLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 SUNFLOWER DR
 City LIVERPOOL State NY Zip Code 13088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Syracuse T A Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2015
Transaction ID : SA11AI.31607
 Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. MICHAEL R FOLEY		Date of Receipt
Mailing Address 108 SUNFLOWER DR		<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City	State	Zip Code
LIVERPOOL	NY	13088
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31608
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="22.00"/>
Name of Employer	Occupation	
Syracuse T A Inc	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="242.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MICHAEL R FOLEY		Date of Receipt
Mailing Address 108 SUNFLOWER DR		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
LIVERPOOL	NY	13088
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31609
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="22.00"/>
Name of Employer	Occupation	
Syracuse T A Inc	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="264.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CATALINA FORTINO		Date of Receipt
Mailing Address 5621 NETHERLAND AVE APT 2D		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
BRONX	NY	10471
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31612
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
NYSUT	OFFICER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="64.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. CATALINA FORTINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5621 NETHERLAND AVE APT 2D
 City BRONX State NY Zip Code 10471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31613
 Amount of Each Receipt this Period
 200.00

B. GREGORY FOX
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 ELIZABETH ST
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.31614
 Amount of Each Receipt this Period
 275.00

C. GREGORY FOX
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 ELIZABETH ST
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31615
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. RONA L FREISER
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 W BEECH ST
 City LONG BEACH State NY Zip Code 11561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31616
 Amount of Each Receipt this Period
 231.50

B. RONA L FREISER
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 W BEECH ST
 City LONG BEACH State NY Zip Code 11561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31617
 Amount of Each Receipt this Period
 46.30

C. GLEN GAGNIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 COUNTY ROUTE 12
 City CENTRAL SQUARE State NY Zip Code 13036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mexico Academy CS FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2015
Transaction ID : SA11AI.31620
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 297.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 29 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)
A. GLEN GAGNIER

Mailing Address 1720 COUNTY ROUTE 12

City State Zip Code
 CENTRAL SQUARE NY 13036

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

Name of Employer Occupation
 Mexico Academy CS FA TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015

Transaction ID : SA11AI.31621

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Mandy GERSTEN

Mailing Address 190 GARTH RD APT 4R

City State Zip Code
 SCARSDALE NY 10583

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

Name of Employer Occupation
 Bronxville T.A. TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015

Transaction ID : SA11AI.31624

Amount of Each Receipt this Period
 204.00

Full Name (Last, First, Middle Initial)
C. CHERIE L GRANT

Mailing Address 6882 BENTON RD

City State Zip Code
 MARCY NY 13403

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

Name of Employer Occupation
 Utica T A TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.31627

Amount of Each Receipt this Period
 250.60

SUBTOTAL of Receipts This Page (optional)..... ▶ 474.60

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

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

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

FOR LINE NUMBER: PAGE 30 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. CHERIE L GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6882 BENTON RD
 City MARCY State NY Zip Code 13403
 FEC ID number of contributing federal political committee. C
 Name of Employer Utica T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11AI.31628
 Amount of Each Receipt this Period
 10.00

B. CHERIE L GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6882 BENTON RD
 City MARCY State NY Zip Code 13403
 FEC ID number of contributing federal political committee. C
 Name of Employer Utica T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31629
 Amount of Each Receipt this Period
 10.00

C. CHERIE L GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6882 BENTON RD
 City MARCY State NY Zip Code 13403
 FEC ID number of contributing federal political committee. C
 Name of Employer Utica T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2015
Transaction ID : SA11AI.31630
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 31 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. ANTHONY M HARMON
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 VAN BUREN ST
 City State Zip Code
 BROOKLYN NY 11221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Fed. Tchrs. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31634
 Amount of Each Receipt this Period
 231.50

B. ANTHONY M HARMON
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 VAN BUREN ST
 City State Zip Code
 BROOKLYN NY 11221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Fed. Tchrs. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31635
 Amount of Each Receipt this Period
 46.30

C. MARJORIE J HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 TROY-SCHENECTADY RD
 City State Zip Code
 LATHAM NY 12110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SEWANHAKA FT TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11AI.31637
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 777.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 32 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)
A. KIRA HENDLER
 Mailing Address 45 SIMSON ST
 City TONAWANDA State NY Zip Code 14150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie 1 Prof Educ Asn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31645
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. CLAUDE HERSH
 Mailing Address ONE HANSON PLACE #22F
 City BROOKLYN State NY Zip Code 11243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation ATTORNEY
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31647
 Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. CLAUDE HERSH
 Mailing Address ONE HANSON PLACE #22F
 City BROOKLYN State NY Zip Code 11243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation ATTORNEY
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31648
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 33 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MATTHEW JACOBS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 ALICE CT
 City LYNBROOK State NY Zip Code 11563
 Date of Receipt: 04 / 10 / 2015
 Transaction ID : SA11AI.31649
 Amount of Each Receipt this Period: 210.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NYSUT Occupation: MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date: 210.00

B. MATTHEW JACOBS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 ALICE CT
 City LYNBROOK State NY Zip Code 11563
 Date of Receipt: 04 / 24 / 2015
 Transaction ID : SA11AI.31650
 Amount of Each Receipt this Period: 30.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NYSUT Occupation: MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date: 240.00

C. MATTHEW JACOBS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 ALICE CT
 City LYNBROOK State NY Zip Code 11563
 Date of Receipt: 05 / 22 / 2015
 Transaction ID : SA11AI.31651
 Amount of Each Receipt this Period: 30.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NYSUT Occupation: MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date: 270.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. MATTHEW JACOBS		Date of Receipt
Mailing Address 23 ALICE CT		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
LYNBROOK	NY	11563
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31652
Name of Employer	Occupation	Amount of Each Receipt this Period
NYSUT	MANAGER	<input type="text" value="30.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MATTHEW JACOBS		Date of Receipt
Mailing Address 23 ALICE CT		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
LYNBROOK	NY	11563
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31653
Name of Employer	Occupation	Amount of Each Receipt this Period
NYSUT	MANAGER	<input type="text" value="30.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MATTHEW JACOBS		Date of Receipt
Mailing Address 23 ALICE CT		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
LYNBROOK	NY	11563
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31654
Name of Employer	Occupation	Amount of Each Receipt this Period
NYSUT	MANAGER	<input type="text" value="30.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="360.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 35 OF 106
(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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL JENSEN
Full Name (Last, First, Middle Initial)
Mailing Address 188 KINSEY AVE

City KENMORE	State NY	Zip Code 14217
-----------------	-------------	-------------------

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

Name of Employer: Kenmore Tchrs Assn
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt: 03 / 19 / 2015
Transaction ID : SA11AI.31655
Amount of Each Receipt this Period: 205.00

B. MICHAEL JENSEN
Full Name (Last, First, Middle Initial)
Mailing Address 188 KINSEY AVE

City KENMORE	State NY	Zip Code 14217
-----------------	-------------	-------------------

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

Name of Employer: Kenmore Tchrs Assn
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt: 04 / 02 / 2015
Transaction ID : SA11AI.31656
Amount of Each Receipt this Period: 41.00

C. MICHAEL JENSEN
Full Name (Last, First, Middle Initial)
Mailing Address 188 KINSEY AVE

City KENMORE	State NY	Zip Code 14217
-----------------	-------------	-------------------

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

Name of Employer: Kenmore Tchrs Assn
Occupation: TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt: 04 / 20 / 2015
Transaction ID : SA11AI.31657
Amount of Each Receipt this Period: 41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 287.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL JENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 188 KINSEY AVE
 City KENMORE State NY Zip Code 14217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kenmore Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31658
 Amount of Each Receipt this Period
 41.00

B. MICHAEL JENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 188 KINSEY AVE
 City KENMORE State NY Zip Code 14217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kenmore Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 369.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11AI.31659
 Amount of Each Receipt this Period
 41.00

C. MICHAEL JENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 188 KINSEY AVE
 City KENMORE State NY Zip Code 14217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kenmore Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31660
 Amount of Each Receipt this Period
 41.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL JENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 188 KINSEY AVE
 City KENMORE State NY Zip Code 14217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kenmore Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31661
 Amount of Each Receipt this Period
 41.00

B. ELLEN J KINDLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7345 GERALD DR
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Eden Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31668
 Amount of Each Receipt this Period
 220.00

C. DANIEL KINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 FOX CHASE DRIVE
 City COHOES State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31670
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	286.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 38 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DANIEL KINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 FOX CHASE DRIVE
 City COHOES State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31671
 Amount of Each Receipt this Period
 25.00

B. DANIEL KINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 FOX CHASE DRIVE
 City COHOES State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31672
 Amount of Each Receipt this Period
 25.00

C. DANIEL KINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 FOX CHASE DRIVE
 City COHOES State NY Zip Code 12047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31673
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAULINE KINSELLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 FIELDSTONE DR
 City State Zip Code
 SCHENECTADY NY 12304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NYSUT FORMER MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31675
 Amount of Each Receipt this Period
 250.00

B. PAMELA J KOSTBAR-JARVI
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 495
 City State Zip Code
 COBLESKILL NY 12043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cobleskill-Rich T.A. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.31680
 Amount of Each Receipt this Period
 20.00

C. PAMELA J KOSTBAR-JARVI
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 495
 City State Zip Code
 COBLESKILL NY 12043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cobleskill-Rich T.A. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31681
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 40 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. COLLEEN KOT
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 THOMAS DR
 City State Zip Code
 BUFFALO NY 14224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Eden Tchrs Assn TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 242.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31682
 Amount of Each Receipt this Period
 242.00

B. MICHELLE M LICHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 TONAWANDA CREEK RD
 City State Zip Code
 EAST AMHERST NY 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Williamsville TA, Inc. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2015
Transaction ID : SA11AI.31687
 Amount of Each Receipt this Period
 216.00

C. MICHELLE M LICHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 TONAWANDA CREEK RD
 City State Zip Code
 EAST AMHERST NY 14051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Williamsville TA, Inc. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 243.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11AI.31688
 Amount of Each Receipt this Period
 27.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 485.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. MICHELLE M LICHT		Date of Receipt
Mailing Address 3980 TONAWANDA CREEK RD		<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City	State	Zip Code
EAST AMHERST	NY	14051
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31689
Name of Employer	Occupation	Amount of Each Receipt this Period
Williamsville TA, Inc.	TEACHER	<input type="text" value="270.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MICHELLE M LICHT		Date of Receipt
Mailing Address 3980 TONAWANDA CREEK RD		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
EAST AMHERST	NY	14051
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31690
Name of Employer	Occupation	Amount of Each Receipt this Period
Williamsville TA, Inc.	TEACHER	<input type="text" value="27.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="297.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DONALD A LITTLE III		Date of Receipt
Mailing Address 145 KUHL AVE		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>
City	State	Zip Code
SYRACUSE	NY	13208
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.31692
Name of Employer	Occupation	Amount of Each Receipt this Period
Syracuse T A Inc	TEACHER	<input type="text" value="25.00"/>
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="79.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 42 OF 106
(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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DONALD A LITTLE III
Full Name (Last, First, Middle Initial)
Mailing Address 145 KUHL AVE

City SYRACUSE	State NY	Zip Code 13208
------------------	-------------	-------------------

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

Name of Employer Syracuse T A Inc	Occupation TEACHER
--------------------------------------	-----------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 28 / 2015
Transaction ID : SA11AI.31693
Amount of Each Receipt this Period: 250.00

B. DONALD A LITTLE III
Full Name (Last, First, Middle Initial)
Mailing Address 145 KUHL AVE

City SYRACUSE	State NY	Zip Code 13208
------------------	-------------	-------------------

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

Name of Employer Syracuse T A Inc	Occupation TEACHER
--------------------------------------	-----------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 06 / 09 / 2015
Transaction ID : SA11AI.31694
Amount of Each Receipt this Period: 25.00

C. DONALD A LITTLE III
Full Name (Last, First, Middle Initial)
Mailing Address 145 KUHL AVE

City SYRACUSE	State NY	Zip Code 13208
------------------	-------------	-------------------

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

Name of Employer Syracuse T A Inc	Occupation TEACHER
--------------------------------------	-----------------------

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 26 / 2015
Transaction ID : SA11AI.31695
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

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

FOR LINE NUMBER: PAGE 43 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DAVID LOVELAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 1780 VILLAGE LN N
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Levittown United Tch Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31697
 Amount of Each Receipt this Period
 600.00

B. ANDREA N LUBBERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2359 OLD POST RD N
 City CASTLETON ON HUDS State NY Zip Code 12033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Averill Park T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2015
Transaction ID : SA11AI.31699
 Amount of Each Receipt this Period
 260.00

C. ALAN B LUBIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 PICO RD
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2015
Transaction ID : SA11AI.31701
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. ALAN B LUBIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 PICO RD
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2015
Transaction ID : SA11AI.31702
 Amount of Each Receipt this Period
 40.00

B. CHRISTOPHER LUCAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 LAFAYETTE AVE
 City KINGSTON State NY Zip Code 12401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Newburgh T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2015
Transaction ID : SA11AI.31704
 Amount of Each Receipt this Period
 210.00

C. PATRICK LYONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 BROOKWOOD DR
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31706
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PATRICK LYONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 BROOKWOOD DR
 City CLIFTON PARK State NY Zip Code 12065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31707
 Amount of Each Receipt this Period
 20.00

B. DEIRDRE B MACNEILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 ARGUS LN
 City TRUMBULL State CT Zip Code 06611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harrison Assn Of Tch Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31932
 Amount of Each Receipt this Period
 20.00

C. DEIRDRE B MACNEILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 ARGUS LN
 City TRUMBULL State CT Zip Code 06611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harrison Assn Of Tch Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31933
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. DEIRDRE B MACNEILL			Date of Receipt
Mailing Address 34 ARGUS LN			<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31934
TRUMBULL	CT	06611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Harrison Assn Of Tch	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="260.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MELINDA MACPHERSON			Date of Receipt
Mailing Address 362 CADMAN DR			<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31710
WILLIAMSVILLE	NY	14221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
BUFFALO TCHR FED INC	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MELINDA MACPHERSON			Date of Receipt
Mailing Address 362 CADMAN DR			<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31711
WILLIAMSVILLE	NY	14221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
BUFFALO TCHR FED INC	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JOSEPH MALONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 579 COUNTY ROUTE 6
 City PHOENIX State NY Zip Code 13135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mexico Academy CS FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2015
Transaction ID : SA11AI.31715
 Amount of Each Receipt this Period
 20.00

B. JOSEPH MALONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 579 COUNTY ROUTE 6
 City PHOENIX State NY Zip Code 13135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mexico Academy CS FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31716
 Amount of Each Receipt this Period
 20.00

C. ROSANNE M MAMO
 Full Name (Last, First, Middle Initial)
 Mailing Address 972 BRENT DR
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEWANHAKA FT Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31721
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 106
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. ROSANNE M MAMO
 Full Name (Last, First, Middle Initial)
 Mailing Address 972 BRENT DR
 City WANTAGH State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEWANHAKA FT Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31722
 Amount of Each Receipt this Period
 200.00

B. JOHN P MANSFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 FOSTER AVE
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer T A Lindenhurst Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31723
 Amount of Each Receipt this Period
 231.50

C. JOHN P MANSFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 FOSTER AVE
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer T A Lindenhurst Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 281.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11AI.31724
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	301.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JOHN P MANSFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 246 FOSTER AVE
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer T A Lindenhurst Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31725
 Amount of Each Receipt this Period
 46.30

B. HARRY J MARENSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4841 43RD ST APT 4K
 City WOODSIDE State NY Zip Code 11377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nassau CC Fed Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31727
 Amount of Each Receipt this Period
 260.00

C. DOROTHY T MCELROY
 Full Name (Last, First, Middle Initial)
 Mailing Address 281 GARTH RD APT C3H
 City SCARSDALE State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scarsdale T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31731
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional).....▶	606.30
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 50 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 Date of Receipt 01 / 29 / 2015
 Transaction ID : SA11AI.31732
 Amount of Each Receipt this Period 356.92
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 356.92

B. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 Date of Receipt 02 / 12 / 2015
 Transaction ID : SA11AI.31733
 Amount of Each Receipt this Period 178.46
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 535.38

C. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 Date of Receipt 02 / 25 / 2015
 Transaction ID : SA11AI.31734
 Amount of Each Receipt this Period 178.46
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date 713.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 713.84
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 51 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 892.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11AI.31735
 Amount of Each Receipt this Period
 178.46

B. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1070.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11AI.31736
 Amount of Each Receipt this Period
 178.46

C. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11AI.31737
 Amount of Each Receipt this Period
 178.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.38
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1427.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11AI.31738
 Amount of Each Receipt this Period
 178.46

B. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1606.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31739
 Amount of Each Receipt this Period
 178.46

C. MARTIN A MESSNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 COLBY RD
 City SCHOHARIE State NY Zip Code 12157
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1784.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31740
 Amount of Each Receipt this Period
 178.46

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.38
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. MARTIN A MESSNER		Date of Receipt
Mailing Address 298 COLBY RD		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
SCHOHARIE	NY	12157
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31741
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="178.46"/>
Name of Employer	Occupation	
NYSUT	OFFICER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1963.06"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MARTIN A MESSNER		Date of Receipt
Mailing Address 298 COLBY RD		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
SCHOHARIE	NY	12157
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31742
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="178.46"/>
Name of Employer	Occupation	
NYSUT	OFFICER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="2141.52"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JULIE METZGER		Date of Receipt
Mailing Address 166 CRAB APPLE LN		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
ROCHESTER	NY	14626
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31744
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.20"/>
Name of Employer	Occupation	
Webster Tchrs Assn	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="200.20"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="557.12"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 54 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JOY E MICHENER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4321 E FRONTIER DR
 City State Zip Code
 BLASDELL NY 14219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Orchard Park T A TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31746
 Amount of Each Receipt this Period
 280.00

B. CHIARA MICHILLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 HARRISON AVE
 City State Zip Code
 HARRISON NY 10528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Harrison Assn Of Tch TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31748
 Amount of Each Receipt this Period
 20.00

C. CHIARA MICHILLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 HARRISON AVE
 City State Zip Code
 HARRISON NY 10528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Harrison Assn Of Tch TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31749
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. CHIARA MICHILLI		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 22 / 2015
Mailing Address 511 HARRISON AVE		Transaction ID : SA11AI.31750
City HARRISON	State NY	Zip Code 10528
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Harrison Assn Of Tch	Occupation TEACHER	
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. MINDI MODIANO		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 03 / 2015
Mailing Address 2525 NEWPORT AVE		Transaction ID : SA11AI.31754
City NISKAYUNA	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00
Name of Employer BH Ballston Lk T A	Occupation TEACHER	
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. DAVID MONAHAN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2015
Mailing Address 312 SIXTH AVE		Transaction ID : SA11AI.31755
City PELHAM	State NY	Zip Code 10803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer New Rochelle F.U.S.E	Occupation TEACHER	
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 56 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DAVID MONAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 SIXTH AVE
 City PELHAM State NY Zip Code 10803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Rochelle F.U.S.E Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2015
Transaction ID : SA11AI.31756
 Amount of Each Receipt this Period
 30.00

B. DAVID MONAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 SIXTH AVE
 City PELHAM State NY Zip Code 10803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Rochelle F.U.S.E Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : SA11AI.31757
 Amount of Each Receipt this Period
 30.00

C. DAVID MONAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 SIXTH AVE
 City PELHAM State NY Zip Code 10803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Rochelle F.U.S.E Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31758
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DAVID MONAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 SIXTH AVE
 City PELHAM State NY Zip Code 10803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Rochelle F.U.S.E Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31759
 Amount of Each Receipt this Period
 300.00

B. JANICE MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 455 TASHUA RD
 City TRUMBULL State CT Zip Code 06611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mt Vernon Fed Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31936
 Amount of Each Receipt this Period
 500.00

C. JANICE MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 455 TASHUA RD
 City TRUMBULL State CT Zip Code 06611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mt Vernon Fed Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31937
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1030.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JOHN MOYLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4027 GLEN ALPINE RD
 City Kingsport State TN Zip Code 37660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bronxville T.A. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11AI.31763
 Amount of Each Receipt this Period
 250.00

B. MICHAEL N MULGREW
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 CASTLETON AVE
 City Staten Island State NY Zip Code 10301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11AI.31764
 Amount of Each Receipt this Period
 232.00

C. MICHAEL N MULGREW
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 CASTLETON AVE
 City Staten Island State NY Zip Code 10301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31765
 Amount of Each Receipt this Period
 58.00

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 59 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL N MULGREW
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 CASTLETON AVE
 City State Zip Code
 STATEN ISLAND NY 10301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Fed. Tchrs. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 348.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31766
 Amount of Each Receipt this Period
 58.00

B. KATHLEEN A MULLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 ALWICK AVE
 City State Zip Code
 WEST ISLIP NY 11795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SEWANHAKA FT TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31769
 Amount of Each Receipt this Period
 20.00

C. KATHLEEN A MULLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 ALWICK AVE
 City State Zip Code
 WEST ISLIP NY 11795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SEWANHAKA FT TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31770
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 60 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. THOMAS V MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 NEWBERRY AVE
 City State Zip Code
 STATEN ISLAND NY 10304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Fed. Tchrs. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31771
 Amount of Each Receipt this Period
 231.50

B. THOMAS V MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 NEWBERRY AVE
 City State Zip Code
 STATEN ISLAND NY 10304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Fed. Tchrs. TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31772
 Amount of Each Receipt this Period
 46.30

C. DAVID J NETTLETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 878 UNION MILLS RD
 City State Zip Code
 BROADALBIN NY 12025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Galway T A TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 207.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31773
 Amount of Each Receipt this Period
 207.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 484.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 61 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DAVID J NETTLETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 878 UNION MILLS RD
 City BROADALBIN State NY Zip Code 12025
 FEC ID number of contributing federal political committee. C
 Name of Employer Galway T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31774
 Amount of Each Receipt this Period
 23.00

B. DAVID J NETTLETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 878 UNION MILLS RD
 City BROADALBIN State NY Zip Code 12025
 FEC ID number of contributing federal political committee. C
 Name of Employer Galway T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31775
 Amount of Each Receipt this Period
 23.00

C. DAVID J NETTLETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 878 UNION MILLS RD
 City BROADALBIN State NY Zip Code 12025
 FEC ID number of contributing federal political committee. C
 Name of Employer Galway T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31776
 Amount of Each Receipt this Period
 23.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. JOHN A OLEAR			Date of Receipt
Mailing Address 2565 NICOLE CT			<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31781
NIAGARA FALLS	NY	14304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation		
Sweet Home E A	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MARIA PACHECO			Date of Receipt
Mailing Address 266 BRADLEY BLVD			<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31783
SCHENECTADY	NY	12304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
Name of Employer	Occupation		
Mohonasen Tchrs Assn	TEACHER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ANDREW PALLOTTA			Date of Receipt
Mailing Address 7 CHATHAM CIRCLE			<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.31784
LOUDONVILLE	NY	12211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="207.00"/>
Name of Employer	Occupation		
NYSUT	OFFICER		
Receipt For: 2015	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="207.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1007.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. JACQUELINE PAREDES			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2015 Transaction ID : SA11AI.31786		
Mailing Address 119 BENSON ST			Amount of Each Receipt this Period 25.00		
City ALBANY	State NY	Zip Code 12206			
FEC ID number of contributing federal political committee. C					
Name of Employer NYSUT		Occupation LEGISLATIVE REP			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

Full Name (Last, First, Middle Initial) B. JACQUELINE PAREDES			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2015 Transaction ID : SA11AI.31787		
Mailing Address 119 BENSON ST			Amount of Each Receipt this Period 25.00		
City ALBANY	State NY	Zip Code 12206			
FEC ID number of contributing federal political committee. C					
Name of Employer NYSUT		Occupation LEGISLATIVE REP			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) C. JACQUELINE PAREDES			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 05 / 2015 Transaction ID : SA11AI.31788		
Mailing Address 119 BENSON ST			Amount of Each Receipt this Period 25.00		
City ALBANY	State NY	Zip Code 12206			
FEC ID number of contributing federal political committee. C					
Name of Employer NYSUT		Occupation LEGISLATIVE REP			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 64 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JACQUELINE PAREDES
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 BENSON ST
 City ALBANY State NY Zip Code 12206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation LEGISLATIVE REP
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31789
 Amount of Each Receipt this Period
 25.00

B. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11AI.31792
 Amount of Each Receipt this Period
 280.00

C. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015
Transaction ID : SA11AI.31793
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 65 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA11AI.31794
 Amount of Each Receipt this Period
 140.00

B. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11AI.31795
 Amount of Each Receipt this Period
 140.00

C. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2015
Transaction ID : SA11AI.31796
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 66 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11AI.31797
 Amount of Each Receipt this Period
 140.00

B. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015
Transaction ID : SA11AI.31798
 Amount of Each Receipt this Period
 140.00

C. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31799
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 67 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31800
 Amount of Each Receipt this Period
 140.00

B. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31801
 Amount of Each Receipt this Period
 140.00

C. PAUL PECORALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 BROOK ST
 City SAYVILLE State NY Zip Code 11782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation OFFICER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1680.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31802
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. Kevin PETERMAN		Date of Receipt
Mailing Address 492 EVERDELL AVE		M M M / D D D / Y Y Y Y Y Y 06 / 09 / 2015
City	State	Zip Code
WEST ISLIP	NY	11795
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31804
Name of Employer F A Of Suffolk Co CC		Amount of Each Receipt this Period
Occupation TEACHER		20.00
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	220.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kevin PETERMAN		Date of Receipt
Mailing Address 492 EVERDELL AVE		M M M / D D D / Y Y Y Y Y Y 06 / 17 / 2015
City	State	Zip Code
WEST ISLIP	NY	11795
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31805
Name of Employer F A Of Suffolk Co CC		Amount of Each Receipt this Period
Occupation TEACHER		20.00
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	240.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DAVID M PETERS		Date of Receipt
Mailing Address 88 HENRY W DUBOIS DR		M M M / D D D / Y Y Y Y Y Y 06 / 17 / 2015
City	State	Zip Code
NEW PALTZ	NY	12561
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31807
Name of Employer Hyde Park TA		Amount of Each Receipt this Period
Occupation TEACHER		240.00
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	240.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. TERESA D PISTORINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 SALEM RD
 City State Zip Code
 HICKSVILLE NY 11801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Manhasset Ed Assn TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31811
 Amount of Each Receipt this Period
 20.00

B. TERESA D PISTORINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 SALEM RD
 City State Zip Code
 HICKSVILLE NY 11801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Manhasset Ed Assn TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2015
Transaction ID : SA11AI.31812
 Amount of Each Receipt this Period
 20.00

C. TERESA D PISTORINO
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 SALEM RD
 City State Zip Code
 HICKSVILLE NY 11801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Manhasset Ed Assn TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31813
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. TERESA D PISTORINO		Date of Receipt
Mailing Address 34 SALEM RD		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
HICKSVILLE	NY	11801
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31814
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
Manhasset Ed Assn	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KEVIN H POLLITT		Date of Receipt
Mailing Address 19 E GROVE ST		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
MASSAPEQUA	NY	11758
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31818
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
Garden City T A	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PATRICIA PULEO		Date of Receipt
Mailing Address 69 LAUREL PL		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
City	State	Zip Code
THORNWOOD	NY	10594
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31819
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="218.01"/>
Name of Employer	Occupation	
Yonkers Fed Of Tchrs	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="218.01"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="258.01"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 71 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.01

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11AI.31820
 Amount of Each Receipt this Period
 10.00

B. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.01

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11AI.31821
 Amount of Each Receipt this Period
 10.00

C. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11AI.31822
 Amount of Each Receipt this Period
 54.17

SUBTOTAL of Receipts This Page (optional)..... ▶ 74.17
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 72 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2015
Transaction ID : SA11AI.31823
 Amount of Each Receipt this Period
 10.00

B. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2015
Transaction ID : SA11AI.31824
 Amount of Each Receipt this Period
 10.00

C. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 366.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31825
 Amount of Each Receipt this Period
 54.17

SUBTOTAL of Receipts This Page (optional)..... ▶ 74.17
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 73 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 376.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31826
 Amount of Each Receipt this Period
 10.00

B. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31827
 Amount of Each Receipt this Period
 10.00

C. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31828
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31829
 Amount of Each Receipt this Period
 54.17

B. PATRICIA PULEO
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 LAUREL PL
 City THORNWOOD State NY Zip Code 10594
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31830
 Amount of Each Receipt this Period
 10.00

C. STEPHEN RECHNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 E 34TH ST APT D3
 City NEW YORK State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Un Cler Adm Tech Stf Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31834
 Amount of Each Receipt this Period
 231.50

SUBTOTAL of Receipts This Page (optional).....▶	295.67
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 75 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. STEPHEN RECHNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 E 34TH ST APT D3
 City NEW YORK State NY Zip Code 10016
 FEC ID number of contributing federal political committee. C
 Name of Employer Un Cler Adm Tech Stf Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31835
 Amount of Each Receipt this Period
 46.30

B. ROBERT REILLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 143 MANNING BLVD
 City ALBANY State NY Zip Code 12203
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation ATTORNEY
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31837
 Amount of Each Receipt this Period
 20.00

C. ROBERT REILLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 143 MANNING BLVD
 City ALBANY State NY Zip Code 12203
 FEC ID number of contributing federal political committee. C
 Name of Employer NYSUT Occupation ATTORNEY
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31838
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 86.30
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. NADIA L RESNIKOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 WOODSTORK DR
 City MOUNT SINAI State NY Zip Code 11766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Middle Cntry TA, Inc. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11AI.31839
 Amount of Each Receipt this Period
 241.28

B. NADIA L RESNIKOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 WOODSTORK DR
 City MOUNT SINAI State NY Zip Code 11766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Middle Cntry TA, Inc. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31840
 Amount of Each Receipt this Period
 60.32

C. NADIA L RESNIKOFF
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 WOODSTORK DR
 City MOUNT SINAI State NY Zip Code 11766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Middle Cntry TA, Inc. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31841
 Amount of Each Receipt this Period
 60.32

SUBTOTAL of Receipts This Page (optional).....▶	361.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MAUREEN RIZZI
Full Name (Last, First, Middle Initial)

Mailing Address 815 WARNER RD

City NISKAYUNA State NY Zip Code 12309

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

Name of Employer NYSUT Occupation MANAGER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11AI.31843

Amount of Each Receipt this Period
 20.00

B. MAUREEN RIZZI
Full Name (Last, First, Middle Initial)

Mailing Address 815 WARNER RD

City NISKAYUNA State NY Zip Code 12309

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

Name of Employer NYSUT Occupation MANAGER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31844

Amount of Each Receipt this Period
 20.00

C. STERLING W ROBERSON
Full Name (Last, First, Middle Initial)

Mailing Address 526 WALES AVE 1ST FL

City BRONX State NY Zip Code 10455

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

Name of Employer United Fed. Tchrs. Occupation TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31845

Amount of Each Receipt this Period
 231.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 271.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. STERLING W ROBERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 WALES AVE 1ST FL
 City BRONX State NY Zip Code 10455
 FEC ID number of contributing federal political committee. C
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31846
 Amount of Each Receipt this Period
 46.30

B. PHILIP RUMORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 271 PORTER AVE
 City BUFFALO State NY Zip Code 14201
 FEC ID number of contributing federal political committee. C
 Name of Employer BUFFALO TCHR FED INC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31849
 Amount of Each Receipt this Period
 300.00

C. ANDREW D SAKO
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 LYNCHBURG CT
 City ORCHARD PARK State NY Zip Code 14127
 FEC ID number of contributing federal political committee. C
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.31850
 Amount of Each Receipt this Period
 220.00

SUBTOTAL of Receipts This Page (optional).....	566.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. ANDREW D SAKO
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 LYNCHBURG CT
 City ORCHARD PARK State NY Zip Code 14127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAC FED OF ERIE CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31851
 Amount of Each Receipt this Period
 60.00

B. GLORIA M SALERNO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2220 GUNTHER AVE
 City BRONX State NY Zip Code 10469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31852
 Amount of Each Receipt this Period
 242.00

C. GLORIA M SALERNO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2220 GUNTHER AVE
 City BRONX State NY Zip Code 10469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer White Plains T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31853
 Amount of Each Receipt this Period
 44.00

SUBTOTAL of Receipts This Page (optional).....▶	346.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JANE C SEGADELLI
Full Name (Last, First, Middle Initial)

Mailing Address 30 LINDEN ST

City GARDEN CITY State NY Zip Code 11530

FEC ID number of contributing federal political committee. C

Name of Employer Nassau CC Fed Tchrs Occupation TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11AI.31860

Amount of Each Receipt this Period
 500.00

B. JANE C SEGADELLI
Full Name (Last, First, Middle Initial)

Mailing Address 30 LINDEN ST

City GARDEN CITY State NY Zip Code 11530

FEC ID number of contributing federal political committee. C

Name of Employer Nassau CC Fed Tchrs Occupation TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11AI.31861

Amount of Each Receipt this Period
 500.00

C. MICHAEL B SHAW
Full Name (Last, First, Middle Initial)

Mailing Address 104 IRWINWOOD RD

City LANCASTER State NY Zip Code 14086

FEC ID number of contributing federal political committee. C

Name of Employer Lancaster CTA, Inc Occupation TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : SA11AI.31863

Amount of Each Receipt this Period
 294.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1294.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2015
Transaction ID : SA11AI.31864
 Amount of Each Receipt this Period
 2.75

B. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2015
Transaction ID : SA11AI.31865
 Amount of Each Receipt this Period
 2.75

C. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2015
Transaction ID : SA11AI.31866
 Amount of Each Receipt this Period
 2.75

SUBTOTAL of Receipts This Page (optional).....▶	8.25
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 82 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2015
Transaction ID : SA11AI.31867
 Amount of Each Receipt this Period
 2.75

B. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.75

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : SA11AI.31868
 Amount of Each Receipt this Period
 2.75

C. MICHAEL B SHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 IRWINWOOD RD
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster CTA, Inc Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2015
Transaction ID : SA11AI.31869
 Amount of Each Receipt this Period
 2.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 8.25
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 83 OF 106
(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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. TIMOTHY M SOUTHERTON
Full Name (Last, First, Middle Initial)
Mailing Address 20 HERITAGE LN
City SAYVILLE State NY Zip Code 11782
FEC ID number of contributing federal political committee. C
Name of Employer Sayville T A Occupation TEACHER
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2015
Transaction ID : SA11AI.31870
Amount of Each Receipt this Period
225.00

B. TIMOTHY M SOUTHERTON
Full Name (Last, First, Middle Initial)
Mailing Address 20 HERITAGE LN
City SAYVILLE State NY Zip Code 11782
FEC ID number of contributing federal political committee. C
Name of Employer Sayville T A Occupation TEACHER
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2015
Transaction ID : SA11AI.31871
Amount of Each Receipt this Period
50.00

C. TIMOTHY M SOUTHERTON
Full Name (Last, First, Middle Initial)
Mailing Address 20 HERITAGE LN
City SAYVILLE State NY Zip Code 11782
FEC ID number of contributing federal political committee. C
Name of Employer Sayville T A Occupation TEACHER
Receipt For: 2015
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2015
Transaction ID : SA11AI.31872
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. MARIA A SZABLA		Date of Receipt
Mailing Address 166 MCCONKEY DR		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
KENMORE	NY	14223
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31876
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
Erie 1 Prof Educ Asn	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. VICKI S TEDFORD		Date of Receipt
Mailing Address 77 NUMBER 37 RD		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
SARANAC	NY	12981
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31877
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="255.00"/>
Name of Employer	Occupation	
PERU ASN OF TCHRS	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. BARBARA L THOROGOOD		Date of Receipt
Mailing Address 31 DUNCOTT RD		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2015"/>
City	State	Zip Code
FAIRPORT	NY	14450
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.31879
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
Rush Henrietta E A	TEACHER	
Receipt For: 2015	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 106
	<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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11AI.31880
 Amount of Each Receipt this Period
 100.00

B. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11AI.31881
 Amount of Each Receipt this Period
 100.00

C. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015
Transaction ID : SA11AI.31882
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 86 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11AI.31883
 Amount of Each Receipt this Period
 100.00

B. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31884
 Amount of Each Receipt this Period
 100.00

C. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : SA11AI.31885
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 87 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31886
 Amount of Each Receipt this Period
 100.00

B. BARBARA L THOROGOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 DUNCOTT RD
 City FAIRPORT State NY Zip Code 14450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rush Henrietta E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.31887
 Amount of Each Receipt this Period
 100.00

C. CYNTHIA E TVELIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 MEDFORD RD
 City RIDGE State NY Zip Code 11961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F A Of Suffolk Co CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31890
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 88 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. SEAN TVELIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 MEDFORD RD
 City RIDGE State NY Zip Code 11961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F A Of Suffolk Co CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2015
Transaction ID : SA11AI.31892
 Amount of Each Receipt this Period
 20.00

B. SEAN TVELIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 MEDFORD RD
 City RIDGE State NY Zip Code 11961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer F A Of Suffolk Co CC Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11AI.31893
 Amount of Each Receipt this Period
 20.00

C. JOSE M VARGAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 754 BRADY AVE APT 101
 City BRONX State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11AI.31897
 Amount of Each Receipt this Period
 231.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 271.50
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JOSE M VARGAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 754 BRADY AVE APT 101
 City BRONX State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Fed. Tchrs. Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11AI.31898
 Amount of Each Receipt this Period
 46.30

B. EDWARD R VASTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 LIEPER ST
 City HUNTINGTN STA State NY Zip Code 11746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Manhasset Ed Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31900
 Amount of Each Receipt this Period
 210.00

C. MARK R VONA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6833 DERBY RD
 City DERBY State NY Zip Code 14047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Eden Tchrs Assn Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2015
Transaction ID : SA11AI.31908
 Amount of Each Receipt this Period
 231.00

SUBTOTAL of Receipts This Page (optional).....▶	487.30
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 90 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. DAVID VON HOLTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 529 GREEN RD
 City MEXICO State NY Zip Code 13114
 Date of Receipt 06 / 19 / 2015
 Transaction ID : SA11AI.31907
 Amount of Each Receipt this Period 210.00
 Aggregate Year-to-Date 210.00
 Name of Employer Mexico Academy CS FA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼

B. DELIA M WAGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 DEER RUN DR
 City BALLSTON SPA State NY Zip Code 12020
 Date of Receipt 05 / 29 / 2015
 Transaction ID : SA11AI.31909
 Amount of Each Receipt this Period 220.00
 Aggregate Year-to-Date 220.00
 Name of Employer Amsterdam T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼

C. DELIA M WAGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 DEER RUN DR
 City BALLSTON SPA State NY Zip Code 12020
 Date of Receipt 06 / 12 / 2015
 Transaction ID : SA11AI.31910
 Amount of Each Receipt this Period 25.00
 Aggregate Year-to-Date 245.00
 Name of Employer Amsterdam T A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼

SUBTOTAL of Receipts This Page (optional)..... ▶ 455.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. PAUL WEBSTER		Date of Receipt
Mailing Address 840 WORCESTER DR		M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2015
City NISKAYUNA	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31912
Name of Employer NYSUT		Amount of Each Receipt this Period
Occupation MANAGER		25.00
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		225.00

Full Name (Last, First, Middle Initial) B. PAUL WEBSTER		Date of Receipt
Mailing Address 840 WORCESTER DR		M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2015
City NISKAYUNA	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31913
Name of Employer NYSUT		Amount of Each Receipt this Period
Occupation MANAGER		5.00
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		230.00

Full Name (Last, First, Middle Initial) C. PAUL WEBSTER		Date of Receipt
Mailing Address 840 WORCESTER DR		M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2015
City NISKAYUNA	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.31914
Name of Employer NYSUT		Amount of Each Receipt this Period
Occupation MANAGER		5.00
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		235.00

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 92 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. PAUL WEBSTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 WORCESTER DR
 City NISKAYUNA State NY Zip Code 12309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYSUT Occupation MANAGER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2015
Transaction ID : SA11AI.31915
 Amount of Each Receipt this Period
 5.00

B. JONATHAN WEDVIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 OVERLOOK DR
 City MAHOPAC State NY Zip Code 10541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clarkstown TA Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11AI.31917
 Amount of Each Receipt this Period
 25.00

C. PEARL WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 E 91ST ST APT 28
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yonkers Fed Of Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11AI.31919
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 93 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. JACQUELINE A WRIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 RANDOLPH ST
 City LANCASTER State NY Zip Code 14086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sweet Home E A Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015
Transaction ID : SA11AI.31921
 Amount of Each Receipt this Period
 410.00

B. JEFFREY C YONKERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 VERNON PKWY
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mt Vernon Fed Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11AI.31922
 Amount of Each Receipt this Period
 235.20

C. JEFFREY C YONKERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 VERNON PKWY
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mt Vernon Fed Tchrs Occupation TEACHER
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.20

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2015
Transaction ID : SA11AI.31923
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 655.20
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. JEFFREY C YONKERS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 20 / 2015 Transaction ID : SA11AI.31924		
Mailing Address 50 VERNON PKWY			Amount of Each Receipt this Period 10.00		
City MOUNT VERNON	State NY	Zip Code 10552			
FEC ID number of contributing federal political committee. C					
Name of Employer Mt Vernon Fed Tchrs		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.20			

Full Name (Last, First, Middle Initial) B. JEFFREY C YONKERS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 07 / 2015 Transaction ID : SA11AI.31925		
Mailing Address 50 VERNON PKWY			Amount of Each Receipt this Period 46.30		
City MOUNT VERNON	State NY	Zip Code 10552			
FEC ID number of contributing federal political committee. C					
Name of Employer Mt Vernon Fed Tchrs		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.50			

Full Name (Last, First, Middle Initial) C. JEFFREY C YONKERS			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 09 / 2015 Transaction ID : SA11AI.31926		
Mailing Address 50 VERNON PKWY			Amount of Each Receipt this Period 10.00		
City MOUNT VERNON	State NY	Zip Code 10552			
FEC ID number of contributing federal political committee. C					
Name of Employer Mt Vernon Fed Tchrs		Occupation TEACHER			
Receipt For: 2015 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 311.50			

SUBTOTAL of Receipts This Page (optional).....	66.30
TOTAL This Period (last page this line number only).....	66.30

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

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

FOR LINE NUMBER: PAGE 95 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. Full Name (Last, First, Middle Initial)
 JEFFREY C YONKERS

Mailing Address 50 VERNON PKWY

City MOUNT VERNON State NY Zip Code 10552

FEC ID number of contributing federal political committee.

Name of Employer Mt Vernon Fed Tchrs Occupation TEACHER

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA11AI.31927

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="46.30"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="29791.65"/>

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

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

FOR LINE NUMBER: PAGE 96 OF 106
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)
A. NBT Bank
 Mailing Address 52 South Broad St, P.O. Box 351
 City State Zip Code
 Norwich NY 13815
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.31508
 Amount of Each Receipt this Period

 May 15 Interest

Full Name (Last, First, Middle Initial)
B. NBT Bank
 Mailing Address 52 South Broad St, P.O. Box 351
 City State Zip Code
 Norwich NY 13815
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.31509
 Amount of Each Receipt this Period

 June 15 Interest

Full Name (Last, First, Middle Initial)
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 / /
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="166.21"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="166.21"/>

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 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)

A. U.S. Postal Service

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2015

Mailing Address 1425 Central Avenue

Transaction ID : SB21B.31490

City Albany State NY Zip Code 12205

Amount of Each Disbursement this Period

232.00

Purpose of Disbursement
Postage Permit Fee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

232.00

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

232.00

**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 checked="" 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. AFT/COPE		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 555 New Jersey Ave. NW		Transaction ID : SB22.31485
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Transfer to Affiliate Committee	Amount of Each Disbursement this Period 100000.00
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) B. AFT/COPE		Date of Disbursement MM / DD / YYYY 02 / 05 / 2015
Mailing Address 555 New Jersey Ave. NW		Transaction ID : SB22.31486
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Transfer to Affiliate Committee	Amount of Each Disbursement this Period 100000.00
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. AFT/COPE		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 555 New Jersey Ave. NW		Transaction ID : SB22.31491
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Transfer to Affiliate Committee	Amount of Each Disbursement this Period 100000.00
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).....▶	300000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)

A. AFT/COPE

Mailing Address 555 New Jersey Ave. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Transfer to Affiliate Committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2015

Transaction ID : SB22.31492

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

B. AFT/COPE

Mailing Address 555 New Jersey Ave. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Transfer to Affiliate Committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : SB22.31493

Amount of Each Disbursement this Period

100000.00

Full Name (Last, First, Middle Initial)

C. AFT/COPE

Mailing Address 555 New Jersey Ave. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Transfer to Affiliate Committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2015

Transaction ID : SB22.31494

Amount of Each Disbursement this Period

100000.00

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

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

300000.00

**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 checked="" 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31498
City Latham	State NY	
Zip Code 12110-2455	Purpose of Disbursement Transfer to State PAC	Amount of Each Disbursement this Period 65000.00
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) B. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 03 / 27 / 2015
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31499
City Latham	State NY	
Zip Code 12110-2455	Purpose of Disbursement Transfer to State PAC	Amount of Each Disbursement this Period 25000.00
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. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 04 / 24 / 2015
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31500
City Latham	State NY	
Zip Code 12110-2455	Purpose of Disbursement Transfer to State PAC	Amount of Each Disbursement this Period 25000.00
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).....▶	115000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial) A. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 05 / 06 / 2015	
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31501	
City Latham State NY Zip Code 12110-2455	Amount of Each Disbursement this Period 25000.00		
Purpose of Disbursement Transfer to State PAC	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:	State: District:		
Full Name (Last, First, Middle Initial) B. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 05 / 15 / 2015	
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31502	
City Latham State NY Zip Code 12110-2455	Amount of Each Disbursement this Period 75000.00		
Purpose of Disbursement Transfer to State PAC	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:	State: District:		
Full Name (Last, First, Middle Initial) C. VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015	
Mailing Address 800 Troy Schenectady Road		Transaction ID : SB22.31503	
City Latham State NY Zip Code 12110-2455	Amount of Each Disbursement this Period 65000.00		
Purpose of Disbursement Transfer to State PAC	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:	State: District:		
SUBTOTAL of Disbursements This Page (optional)..... ▶		165000.00	
TOTAL This Period (last page this line number only)..... ▶		880000.00	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)

A. Garcia For Chicago

Mailing Address 651 W.Washington Blvd.

City Chicago State IL Zip Code 60661

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.31943

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Marco

Mailing Address 2640 Commerce Dr.

City Harrisburg State NY Zip Code 17110

Purpose of Disbursement
VoteCope award ribbons

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.31496

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. New York State United Teachers

Mailing Address 800 Troy Schenectady Road

City Latham State NY Zip Code 12110

Purpose of Disbursement
Retiree and Inservice Printing & Mailing costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.31497

Amount of Each Disbursement this Period

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

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

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

Form/Schedule: SB29

Transaction ID : SB29.31497

Retiree & In-service printing and mailing costs associated with VoteCope mailings

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. UFT Cope Account		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>11</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02	/	11	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
02	/	11	/	2015									
Mailing Address 52 Broadway		Transaction ID : SB29.31489											
City New York	State NY	Zip Code 10004	Amount of Each Disbursement this Period										
Purpose of Disbursement UFT PAC Coordinators Stipends for 2015		<input type="text"/>	<input type="text" value="42000.00"/>										
Candidate Name		Category/Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. United Federation of Teachers		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td>/</td> <td>11</td> <td>/</td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02	/	11	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y									
02	/	11	/	2015									
Mailing Address 52 Broadway		Transaction ID : SB29.31488											
City New York	State NY	Zip Code 10004	Amount of Each Disbursement this Period										
Purpose of Disbursement UFT Vote/Cope Coordinators Stipends for 2015		<input type="text"/>	<input type="text" value="12000.00"/>										
Candidate Name		Category/Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td>/</td> <td></td> <td>/</td> <td></td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y		/		/	
M M M	/	D D D	/	Y Y Y Y Y Y									
	/		/										
Mailing Address		Amount of Each Disbursement this Period											
City	State	Zip Code	<input type="text"/>										
Purpose of Disbursement		Category/Type											
Candidate Name													
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="54000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="211791.76"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 105 OF 106
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 VOICE OF TEACHERS FOR EDUC/CMTE ON POL EDUC OF NY STATE UNTD TEACHERS (VOTE/COPE) OF NYSUT

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor New York State United Teachers	Nature of Debt (Purpose): Polling Center calls to members re: CD 26 special election
Mailing Address 800 Troy Schenectady Road	
City State Zip Code Latham NY 12110	

Outstanding Balance Beginning This Period <input type="text" value="12642.00"/>	Transaction ID : SD10.22412	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12642.00"/>

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

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="12642.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="12642.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="12642.00"/>

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

Form/Schedule: SD10

Transaction ID : SD10.22412

Calls to indentify potential voters for Hochul in the special election and calls to remind members to vote.(Current loan amount of 12642.00 from a balance of 12642.00 has been forgiven)(A previous settlement amount of 12642.00 has been rescinded)

Form/Schedule:

Transaction ID: