FFC I	ND DIS		CEIPTS MENTS mmittee	Office	use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	P.O. BOX 511				
Check if different					
than previously reported. (ACC)				NY 10918	
2. FEC IDENTIFICATION NU	MBER 🔻			STATE	ZIP CODE ▲ STATE ▼ DISTRICT
C C00466490		3. IS THIS REPORT	NEW (N) OR	× AMENDED (A)	
 4. TYPE OF REPORT (Cho (a) Quarterly Reports: April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterl January 31 Year-End Termination Report (eport (Q1) eport (Q2) y Report (Q3) d Report (YE)	Election	DST-Election Report for t General (30G)	 General (12G) Special (12S) Y Y Y Y 2014 	Runoff (12R) in the NY State of NY Special (30S) in the State of
5. Covering Period		Y Y Y Y 2014	through		Y Y Y 2014
I certify that I have examined this Type or Print Name of Treasurer		-	knowledge and belief it i	s true, correct and com	plete.
Signature of Treasurer BRAL	DLEY T. CRATE		[Electronically Filed]	Date	28 / Y Y Y Y 2014
NOTE: Submission of false, errone	ous, or incomplete	e information ma	ay subject the person signi	ng this Report to the per	nalties of 2 U.S.C. §437g.
Office Use Only					EC FORM 3 Revised 02/2003)

11/28/2014 15 : 37

PAGE 1 / 67

Image# 14952632155

SUMMARY PAGE

PAGE 2 / 67

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Write or Type Committee Name
FRIENDS OF NAN HAYWORTH

			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	90732.90	1635030.64
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	17050.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	90732.90	1617980.64
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	498697.27	1942827.34
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	16992.25
	(C)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	498697.27	1925835.09
8.		h on Hand at Close of orting Period (from Line 27)	427804.29	
9.	the	ts and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	1170319.48	

For further information contact:

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

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

		ILED SUMMARY PAGE	_
FEC Form 3 (Revised 1		of Receipts	 PAGE 3 / 67
Write or Type Committee Nam			-
FRIENDS OF NAN HA	AYWORTH		
Report Covering the Period:	From:	01 / Y Y Y Y 01 2014	To:
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other that	an Ioans) FROM:		
(a) Individuals/Persons Oth	ner Than		
Political Committees (i) Itemized (use Sched	dule A)	72474.00	1226910.91
(ii) Unitemized		3225.00	57995.39
(iii) TOTAL of contributi from individuals		75699.00	1284906.30
(b) Political Party Committe		0.00	0.00
(c) Other Political Committ (such as PACs)		15000.00	273114.43
(d) The Candidate		33.90	77009.91
(e) TOTAL CONTRIBUTION (other than loans)	15		
(add Lines 11(a)(iii), (b),	(c), and (d))	90732.90	1635030.64
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		48.07	15527.65
13. LOANS:			
(a) Made or Guaranteed by Candidate		0.00	632060.84
(b) All Other Loans		0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b		0.00	632060.84
14. OFFSETS TO OPERATING		7 7 7 7	7 7 7
EXPENDITURES			
(Refunds, Rebates, etc.)		0.00	16992.25
15. OTHER RECEIPTS		0.00	F1 00
(Dividends, Interest, etc.)		0.00	51.09
16. TOTAL RECEIPTS (add Lin 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, pag		90780.97	2299662.47

Image# 14952632157

FEC Form 3 (Revised 02/2003) **COLUMN A** COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 498697.27 1942827.34 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 63500.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 63500.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 12050.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 5000.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 17050.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 498697.27 2023377.34 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY** 835720.59 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD

90780.97 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 24 926501.56 25. SUBTOTAL (add Line 23 and Line 24) 498697.27 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD 427804.29 (subtract Line 26 from Line 25).....

Image# 14952632158

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 67

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 I3a 13b 14 15 person for the purpose of soliciting contributions
		e name and a		ee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) JUDITH B. ABEL Mailing Address 200 DIPLOMAT DRIVE 5K City MOUNT KISCO FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: 2014		Zip Code 10549 n /TEACHER ycle-to-Date	Date of Receipt Date of Receipt D / 2014 Transaction ID : SA11AI.18322 Amount of Each Receipt this Period 50.00
—	Primary X General Other (specify)		475.00	Date of Receipt
Di	Mailing Address 4363 MARINERS COVE DRIV City WELLINGTON FEC ID number of contributing	State FL	Zip Code 33449	M M M / D D / Y Y Y Y Y 10 07 2014 2014 Transaction ID : SA11AI.18294 3000000000000000000000000000000000000
	federal political committee. Name of Employer VITAL, MD Receipt For: 2014 Primary General Other (specify)	C Occupation PHYSICIAN Election C		Amount of Each Receipt this Period
С.	Full Name (Last, First, Middle Initial) TRACY KULVIN ALBERS Mailing Address 48 LAKEVIEW AVE. City	State	Zip Code	Date of Receipt
	PIEDMONT FEC ID number of contributing federal political committee. Name of Employer	CA C Occupation	94611	Amount of Each Receipt this Period
	HOMEMAKER Receipt For: 2014 Primary X General Other (specify)	HOMEMAK Election C	KER ycle-to-Date 500.00	
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			800.00

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 0F 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Check only one) Image: Image: Image: Check only one) Image: Image: Image: Image: Check only one) Image: Image: Image: Check only one) Image: Image: Check only one) Image: Im
		e name and a		ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) JOHN J. ATHERTON Mailing Address 16 COACHLIGHT DRIVE			Date of Receipt
	City POUGHKEEPSIE	State NY	Zip Code 12603-4241	Transaction ID : SA11AI.18362
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer RETIRED	Occupation RETIRED	1	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1000.00	
в.	Full Name (Last, First, Middle Initial) REGINA A. AURISICCHIO Mailing Address 11 BRIAN COURT			Date of Receipt
	City CARMEL	State NY	Zip Code 10512	10 01 2014 Transaction ID : SA11AI.18250
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupatior HOMEMAK		
	HOMEMAKER Receipt For: 2014 Primary X General Other (specify)	-	ycle-to-Date 250.00	
— c.	Full Name (Last, First, Middle Initial) DANIEL C. BENTON			Date of Receipt
0.	Mailing Address P.O. BOX 818 City	State	Zip Code	10 / Y Y Y Y Y 10 14 2014
	KATONAH	NY	10536-0818	Transaction ID : SA11AI.18389
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer ANDOR CAPITAL MANAGEMENT Receipt For: 2014	Occupation CHAIRMAN Election C		
	Primary X General Other (specify)		2600.00	
s	UBTOTAL of Receipts This Page (optional)			3350.00
т	OTAL This Period (last page this line number	only)		L , ,

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements n	Use separate schedule(s) for each category of the Detailed Summary Page hay not be sold or used by any	FOR LINE NUMBER: PAGE 7 OF 67 (check only one) I1a 11b 11c 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions
		e name and		ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) DOMINICK A. BERTOLINE Mailing Address 132 BANNON AVENUE			Date of Receipt
	City BUCHANAN	State NY	Zip Code 10511-1302	Transaction ID : SA11AI.18290
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer D. BERTOLINE & SONS Receipt For: 2014	Occupation C.E.O.		1000.00
	Primary X General Other (specify)		ycle-to-Date 1000.00	1
В.	Full Name (Last, First, Middle Initial) MR. THOMAS ROGER BLOCK			Date of Receipt
	Mailing Address SOUTH TOWER 499 SEVENTH AVENUE 21S City	10 / D D / Y Y Y Y 10 15 / 2014		
	NEW YORK	State NY	Zip Code 10018	Transaction ID : SA11AI.18418
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	BLOCK BUILDINGS LLC	EXECUTIV		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary X General Other (specify)		1000.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) JOSEPH BOYLAN			Date of Receipt
	Mailing Address 2037 ROUTE 94	State		10 / D D / Y Y Y Y 10 10 2014
	City SALISBURY MILLS		Zip Code 12577	Transaction ID : SA11AI.18314
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer		1	
	BOYLAN DEVELOPMENT SERVICES INC.		MANAGER	_
	Receipt For: 2014	Election C	ycle-to-Date	
	Other (specify)		250.00	
s	UBTOTAL of Receipts This Page (optional)			2250.00
т	OTAL This Period (last page this line number	only)		

IT Ar				FOR LINE NUMBER: PAGE 8 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions 100 100 100	
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committe	e to solicit contributions from such committee.	
Α.	Full Name (Last, First, Middle Initial) KEVIN BOYLE Mailing Address 82 EAST RIDGE ROAD			Date of Receipt	
	City WACCABUC	State NY	Zip Code 10597	Transaction ID : SA11AI.18344	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer EAST RIDGE INVESTMENTS, LLC	Occupation INVESTOR	2		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 2000.00		
В.	Full Name (Last, First, Middle Initial) CHARLES R. BRONFMAN			Date of Receipt	
	Mailing Address 501 NORTH LAKE WAY	Ctoto	Zin Code	10 / D D / Y Y Y Y 10 15 / 2014	
	City PALM BEACH	State FL	Zip Code 33480	Transaction ID : SA11AI.18437	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer	Occupation		1000.00	
	INFORMATION REQUESTED Receipt For: 2014	1			
	Primary X General Other (specify)		ycle-to-Date 1000.00		
_	Full Name (Last, First, Middle Initial) JOHN CANONI			Date of Receipt	
C.	Mailing Address 20 HIGH MEADOWS RD			10 12 2014	
	City	State NY	Zip Code	Transaction ID : SA11AI.18371	
	MT KISCO FEC ID number of contributing		10549	_	
	federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer RETIRED	Occupatior RETIRED	1		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 250.00		
s	UBTOTAL of Receipts This Page (optional)			1550.00	
T	OTAL This Period (last page this line number	only)			

Т	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH	4		
<u>А</u> .	Full Name (Last, First, Middle Initial) DEBORAH CARSTENS			Date of Receipt
	Mailing Address 7101 N DESERT FAIRWAYS	DR		10 01 2014
	City	State	Zip Code	Transaction ID : SA11AI.18256
	PARADISE VLY	AZ	85253	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Occu RETIRED RETIR		1	
	Receipt For: 2014		vcle-to-Date	_
	Primary X General			1
	Other (specify)	L	850.00	
В.	Full Name (Last, First, Middle Initial) BRANDON CICCONE			Date of Receipt
	Mailing Address 45 THERESA BLVD			M M / D D / Y Y Y Y 10 14 2014
	City WAPPINGERS FALLS	State NY	Zip Code 12590	Transaction ID : SA11AI.18481
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	BEN CICCONE INC	PRESIDEN	-	
	Receipt For: 2014	Election C	ycle-to-Date	_
	Other (specify)		1000.00	
c.	Full Name (Last, First, Middle Initial) ROY C. COFFEE III			Date of Receipt
J.	Mailing Address 770 5TH ST NW			M M / D D / Y Y Y Y
	APT 1002	State	Zip Code	10 13 2014
	WASHINGTON	DC	20001	Transaction ID : SA11AI.18440
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of EmployerOccupaCOFFEE & ASSOCIATESPRINCReceipt For:2014Election			500.00
			- ycle-to-Date	_
	Primary X General Other (specify)		500.00]
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			

IT Ar				FOR LINE NUMBER: PAGE 10 OF 67 (check only one) X 11a 11b 11c 11d 11a 11b 11c 11d 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions on to solicit contributions from such committee	
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		audress of any political committ	ee to solicit contributions from such committee.	
A.	Full Name (Last, First, Middle Initial) ROBERT K. COHEN Mailing Address 29 CHERRY LAWN BLVD			Date of Receipt	
	City NEW ROCHELLE	State NY	Zip Code 10804	10 05 2014 Transaction ID : SA11AI.18285	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer SELF EMPLOYED	Occupation ATTORNE			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1250.00]	
— В.	Full Name (Last, First, Middle Initial) DR. MITCHELL D. COHN			Date of Receipt	
	Mailing Address 76 VALLEY LANE			10 / Y Y Y Y 10 01 / 2014	
	City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID : SA11AI.18249	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer	Occupation		500.00	
	NORTHEASTERN ANESTHESIA SERVICE Receipt For: 2014	ANESTHES	vcle-to-Date	_	
	Primary General Other (specify)		2000.00	1	
с.	Full Name (Last, First, Middle Initial) JOSEPH A. COMERFORD			Date of Receipt	
	Mailing Address 1223 ROUTE 82			10 10 2014	
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID : SA11AI.18320	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer RETIRED	Occupation RETIRED	1	50.00	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 395.00]	
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number				

SCHEDULE A (FEC Form	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only of 11a 12		PAGE 11 OF 67	
Any information copied from such Repo or for commercial purposes, other than						
NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYV	VORTH					
Full Name (Last, First, Middle Initial) MICHAEL CUNNINGHAM			Date of F	Receipt		
Mailing Address 19 AILISH LANE	Tailing Address 19 AILISH LANE					
City BREWSTER	State NY	Zip Code 10509	Transactio	n ID : SA1	1AI.18384	
FEC ID number of contributing federal political committee.	С		Amount o	of Each Re	eceipt this Period	
Name of Employer ARC OF WESTCHESTER	Occupatio SOCIAL W		- L		500.00	
Receipt For: 2014	Election C	Cycle-to-Date				
Primary X General Other (specify)		500.00]			
Full Name (Last, First, Middle Initial)			Date of F	Receipt		
Mailing Address 4875 PELICAN COL APT. 2004	м м 10	/ D D 13	/ Y Y Y Y 2014			
City BONITA SPRINGS	Transaction	n ID : SA1	1AI.18378			
FEC ID number of contributing federal political committee.	C		Amount o	of Each Re	eceipt this Period	
Name of Employer	Occupatio	n		,	1000.00	
RETIRED	RETIRED					
Receipt For: 2014	Election C	Cycle-to-Date				
Primary X General Other (specify)		1500.00]			
Full Name (Last, First, Middle Initial)			Date of F	Receipt		
Mailing Address 64 WEST SHORE D	R		м м 10	/ D D 10	/ Y Y Y Y 2014	
City	State	Zip Code	Transactio			
PUTNAM VALLEY	NY	10579				
FEC ID number of contributing federal political committee.	C		Amount o	of Each Re	eceipt this Period	
Name of Employer	Occupatio	n			5200.00	
EFT NETWORK	CEO			OW FOR R	EDESIGNATION; EXCES	
		Cycle-to-Date	ລວ.ວ00 RE		11/1/2014	
Other (specify)		13800.00]			
SUBTOTAL of Receipts This Page (op	tional)				6700.00	
			-	,	, , , , , , , , , , , , , , , , , , , ,	
TOTAL This Period (last page this line	number only)					

IT Ar				FOR LINE NUMBER: PAGE 12 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only only one) Image: Image: Check only only only only only only only only
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			
<u>А</u> .	Full Name (Last, First, Middle Initial) STEVEN DAVIS Mailing Address 64 WEST SHORE DR			Date of Receipt
	City PUTNAM VALLEY	State NY	Zip Code 10579	10 10 2014 Transaction ID : SA11AI.18325.0
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of EmployerOcEFT NETWORKCEReceipt For: 2014El		/cle-to-Date	SEE REDESIGNATION BELOW
	Primary X General Other (specify)		, 11900.00	
в.	Full Name (Last, First, Middle Initial) STEVEN DAVIS Mailing Address 64 WEST SHORE DR			Date of Receipt
	City PUTNAM VALLEY	State NY	Zip Code 10579	M M / D D / Y
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer EFT NETWORK Receipt For: 2010	Occupation CEO	/cle-to-Date	REDESIGNATED: DEBT RETIREMENT
	Primary General Other (specify)		13800.00	
C.	Full Name (Last, First, Middle Initial) NICHOLAS J. DELUCCIA Mailing Address 18 STONEHEDGE DR			Date of Receipt
	City POUGHKEEPSIE	State NY	Zip Code 12603	M M / D D / Y
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer MID HUDSON CONSTRUCTION Receipt For: 2014	Occupation PRESIDEN		
	Primary X General Other (specify)		1000.00]
s	UBTOTAL of Receipts This Page (optional)			1000.00
T	OTAL This Period (last page this line number of	only)		

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	н		
A.	Full Name (Last, First, Middle Initial) CAMILLE DEMARTINO			Date of Receipt
	Mailing Address P.O. BOX 518	10 01 2014		
	City LINCOLNDALE	State NY	Zip Code 10540	Transaction ID : SA11AI.18251
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAK		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary X General Other (specify)		4000.00]
В.	Full Name (Last, First, Middle Initial) JOHN M. FIGLIACCONI			Date of Receipt
2.	Mailing Address 115 NORTH MAIN ST	M M / D D / Y Y Y Y 10 13 2014		
	City FLORIDA	State NY	Zip Code 10921	Transaction ID : SA11AI.18454
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	250.00
	INFORMATION REQUESTED	_	ION REQUESTED	_
	Receipt For: 2014 Primary X General	Election C	ycle-to-Date	
	Other (specify)		250.00]
c.	Full Name (Last, First, Middle Initial) WILLIAM FRUMKIN			Date of Receipt
0.	Mailing Address 41 TAMARACK ROAD			10 01 2014
	City MAHOPAC	State NY	Zip Code 10541	Transaction ID : SA11AI.18257
	FEC ID number of contributing		10541	
	federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer RETIRED	Occupation RETIRED	۱ 	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 250.00]
s	UBTOTAL of Receipts This Page (optional)			2350.00
Т	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one)	
			hay not be sold or used by any	12 13a 13b 14 15 person for the purpose of soliciting contributions ee to solicit contributions from such committee.	<u>'</u>
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	Н			
<u>А</u> .	Full Name (Last, First, Middle Initial) ALFRED A. FUSCO JR.			Date of Receipt	
	Mailing Address 19 WAYWAYUP LANE			M M / D D / Y Y Y Y 10 13 2014	
	City PORT JERVIS	State NY	Zip Code 12771	Transaction ID : SA11AI.18468	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer INFORMATION REQUESTED	Occupation INFORMAT	n FION REQUESTED		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 300.00]	
В.	Full Name (Last, First, Middle Initial) DR. JENNIFER B. GANNON			Date of Receipt	
	Mailing Address 83 FAIRWAY DRIVE	M M / D D / Y Y Y Y 10 04 2014			
	City STAMFORD	State CT	Zip Code 06903	Transaction ID : SA11AI.18281	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	1
	Name of Employer	Occupation	1		
	MOUNT KISCO MEDICAL GROUP		CIAN-GYNECOLOGIST		
	Receipt For: 2014	Election C	ycle-to-Date	_	
	Other (specify)		1000.00]	
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt	
	Mailing Address 1 MUNICIPAL PLACE			M M / D D / Y Y Y Y 10 10 2014	
	City CROTON ON HUDSON		Zip Code 10520	Transaction ID : SA11AI.18352	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
Name of Employer		Occupation			
	CROTON AUTO PARK AUTO DEA Receipt For: 2014 Primary X General				
			ycle-to-Date		
	Other (specify)		250.00	1	
s	UBTOTAL of Receipts This Page (optional)				
1	OTAL This Period (last page this line number	only)			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 15 0F 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one)
			Detailed Summary Page	12 13a 13b 14 15
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	Н		
<u>А</u> .	Full Name (Last, First, Middle Initial) LOUIS GIORDANO			Date of Receipt
	Mailing Address 1135 BRIDGE POINTE LANE	E		10 10 2014
	City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID : SA11AI.18353
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer CROTON AUTO PARK	Occupation PRESIDEN		
	Receipt For: 2014	Election C	ycle-to-Date	
	Other (specify)		2450.00	
В.	Full Name (Last, First, Middle Initial) CLIFFORD C. GOROVOY			Date of Receipt
ь.	Mailing Address P.O. BOX 402	10 13 2014		
	City MONROE	State NY	Zip Code 10949	Transaction ID : SA11AI.18466
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	า	1000.00
	INFORMATION REQUESTED	INFORMAT	TION REQUESTED	
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary X General Other (specify)		1000.00]
— c.	Full Name (Last, First, Middle Initial) LISA GRECCO			Date of Receipt
0.	Mailing Address 5 RUSTLING LANE			10 12 2014
	City BEDFORD	State NY	Zip Code 10506	Transaction ID : SA11AI.18372
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	RETIRED	RETIRED		
	Receipt For: 2014	Election C	ycle-to-Date	
	Other (specify)		450.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
т	OTAL This Period (last page this line number	only)		, ,

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 16 OF 67 (check only one)
	EMIZED RECEIPTS		Detailed Summary Page	12 $13a$ $13b$ 14 15
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH	4		
Α.	Full Name (Last, First, Middle Initial) MARK GRENITZ			Date of Receipt
Λ.	Mailing Address 11041 NW 7 STREET			10 07 2014
	City PLANTATION	State FL	Zip Code 33324-8103	Transaction ID : SA11AI.18295
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer WESTSIDE OB/GYN GROUP, L.L.C.	Occupation PHYSICIAN		250.00
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 250.00	
	Full Name (Last, First, Middle Initial)		y y	Data of Descipt
В.	JEAN CLAUDE GRUFFAT Mailing Address 923 5TH AV	Date of Receipt		
	City NEW YORK	State NY	Zip Code 10021	Transaction ID : SA11AI.18316
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	l	
	RETIRED	RETIRED		
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Primary X General Other (specify)		1000.00	
с.	Full Name (Last, First, Middle Initial) CHARLES F. GUNTHER			Date of Receipt
0.	Mailing Address P.O. BOX 521			10 / Y Y Y Y 10 14 2014
	City CROTON FALLS	State NY	Zip Code 10519-0521	Transaction ID : SA11AI.18385
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
RETIRED RETIRE Receipt For: 2014 Election		Occupation RETIRED		300.00
		Election Cy	/cle-to-Date	
	Primary X General Other (specify)		300.00	
s	UBTOTAL of Receipts This Page (optional)			1550.00
Т	OTAL This Period (last page this line number of			

IT Ar				FOR LINE NUMBER: PAGE 17 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only only only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only only only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only only only one) Image: Check only one) Image: Check one) Image: Check one) Image: Check only one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) Image: Check one) <td< th=""></td<>
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committe	e to solicit contributions from such committee.
Α.	A. Full Name (Last, First, Middle Initial) JOHN HAGAN Mailing Address 409 NW BRIARCLIFF PARKWAY			Date of Receipt
	City KANSAS CITY	State MO	Zip Code 64116	Transaction ID : SA11AI.18334
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer DISCOVER VISION CENTERS	Occupation EYE SURG		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 500.00	
в.	Full Name (Last, First, Middle Initial) DR. MICHAEL HEALY M.D. Mailing Address 495 MAIN STREET			Date of Receipt
	City MOUNT KISCO	State NY	Zip Code 10549	10 15 2014 Transaction ID : SA11AI.18405
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation INFORMAT	ION REQUESTED	1000.00
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1000.00	
c.	Full Name (Last, First, Middle Initial) JOHN P. JOHNSON			Date of Receipt
	Mailing Address 120 E 36TH ST NO. 9B City	State	Zip Code	10 / 13 / 2014
	NEW YORK	NY	10016	Transaction ID : SA11AI.18444
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
	Name of Employer INFORMATION REQUESTED Pageint For: 2014		TION REQUESTED	250.00
	Receipt For: 2014 Primary X General Other (specify)		ycle-to-Date 250.00	
s	 UBTOTAL of Receipts This Page (optional)			1350.00
т	OTAL This Period (last page this line number	only)		

I

Т	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	itatements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Im
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH	name and a	address of any political committ	ee to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) A. PAUL JOHNSON Mailing Address 19 BRADFORD COURT City S			Zip Code	Date of Receipt
	BREWSTER	State NY	10509	Transaction ID : SA11AI.18332
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer VERIZON	Occupation DIRECTOR		
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 1050.00	
В.	Full Name (Last, First, Middle Initial) BRAD KARP			Date of Receipt
	Mailing Address 115 CENTRAL PARK WEST APT 3D	M M / D D / Y		
	City NEW YORK	State NY	Zip Code 10023	Transaction ID : SA11AI.18420
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer PAUL, WEISS, RIFKIND, WHARTON & GARRIS	Occupation ATTORNEY		1000.00
	Receipt For: 2014 Primary X General Other (specify)		vcle-to-Date 1000.00]
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt
0.	Mailing Address 87 BEDFORD ROAD			M M / D D / Y Y Y Y 10 10 2014
	City KATONAH	State NY	Zip Code 10536	Transaction ID : SA11AI.18408
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
			CONTRACTOR	500.00
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 500.00]
s	UBTOTAL of Receipts This Page (optional)			1600.00
Г	OTAL This Period (last page this line number of	only)		, ,

IT Ar				FOR LINE NUMBER: PAGE 19 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions to solicit contributions from such committee 67
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		audress of any political committe	ee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) SUE W. KELLY Mailing Address 187 JAY STREET			Date of Receipt
	City KATONAH	State NY	Zip Code 10536-3702	10 15 2014 Transaction ID : SA11AI.18431
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer RETIRED	Occupation RETIRED	1	
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 1000.00	
В.				Date of Receipt
	Mailing Address P.O. BOX 288	Zip Code	10 / D D / Y Y Y Y 10 15 / 2014	
	SUGAR LOAF	State NY	10981	Transaction ID : SA11AI.18409
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	l	
	PDJ COMPONENTS	PRESIDEN		
	Receipt For: 2014 Primary X General	Election Cy	/cle-to-Date	_
	Other (specify)		2750.00	
c.	Full Name (Last, First, Middle Initial) THERESA KILMAN			Date of Receipt
	Mailing Address 45 TOWER HILL ROAD			10 11 2014
	City SCARBOROUGH	State NY	Zip Code 10510	Transaction ID : SA11AI.18363
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAK		1000.00
_	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 1500.00	
s	UBTOTAL of Receipts This Page (optional)			2500.00
т	OTAL This Period (last page this line number	only)		

IT Ar	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page ay not be sold or used by any	FOR LINE NUMBER: PAGE 20 OF 67 (check only one) I1a 11b 11c 11d 11a 11b 11c 11d 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTI	e name and a	address of any political committ	ee to solicit contributions from such committee.
Α.	A. Full Name (Last, First, Middle Initial) SHARON KILMER Mailing Address 200 E. 69TH STREET, #33B			Date of Receipt
	City NEW YORK	State NY	Zip Code 10021-5746	10 01 2014 Transaction ID : SA11AI.18263
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
	Name of Employer ANGELO, GORDON & CO.	Occupation INVESTME	NT MANAGER	
	Receipt For: 2014 Primary X General Other (specify)	Election C	vcle-to-Date]
в.	Full Name (Last, First, Middle Initial) BRUCE A. KOLKMANN Mailing Address 37 E. HUDSON HARBOUR D	RIVE		Date of Receipt
	City POUGHKEEPSIE	State NY	Zip Code 12601-5379	10 13 2014 Transaction ID : SA11AI.18450
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer RAYMOND OPTICIANS, INC.	Occupation PHYSICIAN	l	500.00
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 500.00	1
с.	Full Name (Last, First, Middle Initial) DR. JERRY J. KOPELMAN			Date of Receipt
	Mailing Address 7600 LANDMARK WAY	State	Zip Code	M M / D D / Y Y Y Y 10 07 2014
	GREENWOOD VILLAGE	CO	80111	Transaction ID : SA11AI.18296
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer SELF	Occupation PHYSICIAN	١	199.00
	Receipt For: 2014 Primary X General Other (specify)		ycle-to-Date 299.00]
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	e name and a		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) BRIAN LANDRY Mailing Address 43 GLENWOOD LANE	State	Zip Code	Date of Receipt
	KATONAH FEC ID number of contributing federal political committee.	NY	10536	Amount of Each Receipt this Period
	Name of Employer ALLIANZ OF AMERICA Receipt For: 2014 Primary X General Other (specify)	Occupation TRADER Election C	ycle-to-Date 850.00	250.00
в.	Full Name (Last, First, Middle Initial) KIMBALL ANN LANE Mailing Address 1540 BROADWAY FL 11			Date of Receipt
	City NEW YORK	State NY	Zip Code 10036	Transaction ID : SA11AI.18446
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer INFORMATION REQUESTED Receipt For: 2014 Primary X General Other (specify)	_	TON REQUESTED ycle-to-Date 250.00	250.00
с.	Full Name (Last, First, Middle Initial) KIM LAWRENCE Mailing Address 5 LANE GATE ROAD			Date of Receipt
	City WAPPINGER FALLS	State NY	Zip Code 12590	Transaction ID : SA11AI.18276
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer HERB REDI PROPERTIES Receipt For: 2014 Primary X General Other (specify)		n Y MANAGEMENT ycle-to-Date 500.00	
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			1000.00

IT Ar				FOR LINE NUMBER: PAGE 22 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full)		address of any political committe	ee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) ROBBIN LAWSON Mailing Address 2301 SPANISH RIVER RD			Date of Receipt
	City	State	Zip Code	10 / 10 / 2014 Transaction ID : SA11AI.18348
	BOCA RATON	FL	33432	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAK		
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Other (specify)		5200.00	
В.	Full Name (Last, First, Middle Initial) SETH LEDERMAN			Date of Receipt
	Mailing Address 166 E 96TH ST.	10 / Y Y Y Y 10 11 2014		
	City NEW YORK	State NY	Zip Code 10128	Transaction ID : SA11AI.18365
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		1000.00
	TONIX PHARMA	CEO		
	Receipt For: 2014 Primary X General	Election Cy	/cle-to-Date	
	Other (specify)		1000.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) DR. THOMAS LEE			Date of Receipt
•.	Mailing Address 90 SAGAMORE ROAD			10 01 2014
	City	State	Zip Code	Transaction ID : SA11AI.18265
	BRONXVILLE	NY	10708	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer NEW YORK NEUROLOGICAL SURGERY, PC	Occupation PHYSICIAN		1000.00
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 3600.00	
s	UBTOTAL of Receipts This Page (optional)			4600.00
-	OTAL This Period (last page this line number o	only)		

IT Ar				FOR LINE NUMBER: PAGE 23 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 I3a 13b 14 15 person for the purpose of soliciting contributions formula to the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committ	ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) HEIDI LEEDS Mailing Address 23 BARLOW LANE			Date of Receipt
	City RYE	State NY	Zip Code 10580	Transaction ID : SA11AI.18377
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer KORN FERRY	Occupation RECRUITE		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 250.00]
В.	Full Name (Last, First, Middle Initial) PATRICIA LEVINE			Date of Receipt
	Mailing Address 20 LARCH COURT	State	Zip Code	10 / D D / Y Y Y Y 11 / 2014 Transaction ID : SA11AI.18357
	FISHKILL FEC ID number of contributing federal political committee.	C	12524	Amount of Each Receipt this Period
	Name of Employer RETIRED Receipt For: 2014 Primary X General	Occupation RETIRED Election C	ı ycle-to-Date	
	Other (specify)		275.00	
C.	Full Name (Last, First, Middle Initial) JANET S. LEVY Mailing Address 14 DEVOE ROAD			Date of Receipt
	City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID : SA11AI.18252
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAK	KER	1000.00
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 4100.00]
s	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number	only)		

Т	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Im
		he name and		ee to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) LEORA LEVY Mailing Address 59 PECKSLAND ROAD			Date of Receipt
	City GREENWICH	State CT	Zip Code 06831	Transaction ID : SA11AI.18399
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer HOMEMAKER	Occupation HOMEMAK		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 4680.23]
В.	Full Name (Last, First, Middle Initial) PAUL LINTHORST			Date of Receipt
	Mailing Address 19 HUNTWOOD PLACE	M M / D D / Y Y Y Y 10 15 2014		
	City MOUNT VERNON	State NY	Zip Code 10552	Transaction ID : SA11AI.18400
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		100.00
	SELF-EMPLOYED Receipt For: 2014		IENT CONSULTANT	_
	Primary X General Other (specify)		850.00	1
с.	Full Name (Last, First, Middle Initial) MARC S. LIPSCHULTZ			Date of Receipt
•.	Mailing Address 9 WEST 57TH ST STE 4200	Olata	7. 0. 1.	10 / Y Y Y Y 2014
	City NEW YORK	State NY	Zip Code 10019	Transaction ID : SA11AI.18474
FEC ID number of contributing federal political committee.		С		Amount of Each Receipt this Period
	Name of Employer Occupatio KOHLBERG KRAVIS ROBERTS & CO INVESTMI			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1000.00	1
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			
Α.	Full Name (Last, First, Middle Initial) ANNE MAHONEY	Date of Receipt		
Λ.	Mailing Address 6 COMANCHE COURT			10 01 _2014
	City Katonah	State NY	Zip Code 10536	Transaction ID : SA11AI.18253
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer MKMG	Occupation REGISTER		250.00
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	/cle-to-Date 250.00	1
	Full Name (Last, First, Middle Initial)		, , , , , , , , , , , , , , , , , , ,	
В.	DR. BELLA M. MALITS Mailing Address 10 CITY PLACE, #10E			Date of Receipt
	y State Zip Code			10 15 2014 Transaction ID : SA11AI.18403
	WHITE PLAINS FEC ID number of contributing federal political committee.	NY C	10601	Amount of Each Receipt this Period
	Name of Employer MOUNT KISCO MEDICAL GROUP	Occupation		
	Receipt For: 2014	Election Cy	/cle-to-Date	
	Primary X General Other (specify)		1100.00	1
— с.	Full Name (Last, First, Middle Initial)			Date of Receipt
•.	Mailing Address 2C HERITAGE HILLS DRIVE			M M / D D / Y Y Y Y 10 10 2014
	City SOMERS	State NY	Zip Code 10589	Transaction ID : SA11AI.18329
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer MOUNT KISCO MEDICAL GROUP	Occupation PHYSICIAN		500.00
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 1000.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
-	OTAL This Period (last page this line number o			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and Statements m					
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH		address of any political committe	e to solicit contributions from such committee.	
Α.	A. Full Name (Last, First, Middle Initial) PAUL MASSEY Mailing Address 76 SHORE DRIVE City LARCHMONT State NY		Zip Code	Date of Receipt	
			10538	Transaction ID : SA11AI.18305	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer MASSEY REALTY	Occupation CEO			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1000.00		
В.	Full Name (Last, First, Middle Initial) DAVID L. MATHUS			Date of Receipt	
	Mailing Address 111 E 80TH ST. APT 2A.	APT 2A.			
	City NEW YORK	State NY	Zip Code 10075	Transaction ID : SA11AI.18435	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period	
	Name of Employer	Occupation	1		
	MCDERMOTT WILL & EMERY	ATTORNEY	/		
	Receipt For: 2014	Election C	/cle-to-Date		
	Primary X General Other (specify)		250.00		
c.	Full Name (Last, First, Middle Initial) PETER W. MAY			Date of Receipt	
	Mailing Address 146 CENTRAL PARK W #15E			10 15 2014	
	City	State	Zip Code	Transaction ID : SA11AI.18415	
	NEW YORK	NY	10023		
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
TRIAN PARTNERS PRESIDE		Occupation			
		Election Cy	/cle-to-Date		
	Other (specify)		2000.00		
s	UBTOTAL of Receipts This Page (optional)			3250.00	
т	OTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and Statements or for commercial purposes, other than using the name and						
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTI					
A. Full Name (Last, First, Middle Initial) JAMES L. MCGRANE Mailing Address 33 LINDY DRIVE		State	Zip Code	Date of Receipt		
	CARMEL	NY	10512	Transaction ID : SA11AI.18386		
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
	Name of Employer MCGRANE CONSULTING, LLC	Occupation CONSULT		1500.00		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1750.00			
В.	Full Name (Last, First, Middle Initial) FLOYD W. MCKINNON			Date of Receipt		
	Mailing Address 2 STONY GATE OVAL	10 09 2014				
	City NEW ROCHELLE	State NY	Zip Code 10804	Transaction ID : SA11AI.18430		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	1	500.00		
	COTSWORLD	EXECUTIV	E			
	Receipt For: 2014	Election C	ycle-to-Date			
	Primary X General Other (specify)		1700.00			
c.	Full Name (Last, First, Middle Initial) JAMES MCKINNON			Date of Receipt		
	Mailing Address 91 EDGERSTOUNE RD			10 06 2014		
	City	State	Zip Code	Transaction ID : SA11AI.18291		
	PRINCETON	NJ	08540			
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period		
COTSWOLD INDUSTRIES TEXTILE		Occupation	1	1000.00		
		TEXTILES				
		Election C	ycle-to-Date	_		
	Other (specify)	1500.00				
s	UBTOTAL of Receipts This Page (optional)			3000.00		
T	OTAL This Period (last page this line number	only)		, ,		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check one)
		e name and a		person for the purpose of soliciting contributions be to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) MARTHA MCKINNON Mailing Address 91 EDGERSTOUNE ROAD City State PRINCETON NJ		State NJ	Zip Code 08540	Date of Receipt 10 14 2014 Transaction ID : SA11AI.18475
	FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: 2014 Primary X General Other (specify)		n DESIGNER ycle-to-Date 1250.00	Amount of Each Receipt this Period
В.	Full Name (Last, First, Middle Initial) J MCLANE Mailing Address 3902 FLOYD ST City	State	Zip Code	Date of Receipt
	HOUSTON FEC ID number of contributing federal political committee. Name of Employer LIME ROCK MANAGEMENT LP Receipt For: 2014 Primary General Other (specify)	1	77007 NT PROFESSIONAL ycle-to-Date 2000.00	Amount of Each Receipt this Period
C.	Full Name (Last, First, Middle Initial) MR. DANIEL B. MCMANUS Mailing Address 4 WOODS BRIDGE ROAD City KATONAH	State NY	Zip Code 10536	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer CLARK ASSOCIATES FUNERAL HOME Receipt For: 2014 Primary X General Other (specify)	C Occupation DIRECTOR Election C	1	Amount of Each Receipt this Period
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			3500.00

IT Ar				FOR LINE NUMBER: PAGE 29 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 I3a I3b I4 15 person for the purpose of soliciting contributions see to solicit contributions from such committee. 10 10		
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH		auress of any pointcal committe			
Α.	Full Name (Last, First, Middle Initial) JOHN MCMANUS Mailing Address 2082 GRACE MANOR COUR	-		Date of Receipt		
	Walking Address 2082 GRACE MANOR COUR	I		10 10 2014		
	City Sta MCLEAN V/ FEC ID number of contributing federal political committee.		Zip Code 22101	Transaction ID : SA11AI.18333		
				Amount of Each Receipt this Period		
	Name of Employer MCMANUS GROUP	Occupation CONSULTI				
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 500.00			
В.	Full Name (Last, First, Middle Initial) PETER MCQUILLAN			Date of Receipt		
Ъ.	Mailing Address P.O. BOX 657	M M / D D / Y Y Y Y 10 15 2014				
	City CROSS RIVER	State NY	Zip Code 10518	Transaction ID : SA11AI.18393		
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
	Name of Employer	Occupation				
	RETIRED	RETIRED				
	Receipt For: 2014	Election Cy	cle-to-Date	_		
	Primary X General Other (specify)		5700.00			
с.	Full Name (Last, First, Middle Initial)			Date of Receipt		
	Mailing Address 399 LONG RIDGE ROAD			M M / D D / Y Y Y Y 10 03 2014		
	City BEDFORD	State NY	Zip Code 10506	Transaction ID : SA11AI.18275		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of EmployerOccupationHOULIHAN LAWRENCEREAL EST		ATE AGENT	1000.00			
	Receipt For: 2014 Primary X General Other (specify)	Election Cy	vcle-to-Date 1000.00			
s	UBTOTAL of Receipts This Page (optional)			1600.00		
т	OTAL This Period (last page this line number of	only)				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 OF 67 (check only one) X 11a 11b 11c 11d	
			12 13a 13b 14 15	
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT			
Α.	Full Name (Last, First, Middle Initial) MICHAEL MILLETTE			Date of Receipt
7.11	Mailing Address 80 RIDGE ROAD			10 04 Y Y Y Y 2014
	CityStateNEW ROCHELLENY		Zip Code 10804	Transaction ID : SA11AI.18282
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer GOLDMAN, SACHS & CO	Occupation BANKER	1	500.00
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary X General Other (specify)		500.00]
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
υ.	Mailing Address 4 BERNADETTE WAY	M M / D D / Y Y Y Y 10 09 2014		
	City WASHINGTONVILLE	State NY	Zip Code 10992	Transaction ID : SA11AI.18438
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	25.00
	RETIRED	RETIRED		
	Receipt For: 2014	Election C	ycle-to-Date	
	Primary X General Other (specify)		225.00]
— с.	Full Name (Last, First, Middle Initial) TERRENCE MULLEN			Date of Receipt
	Mailing Address 11 ARGYLE PLACE			10 15 / Y Y Y Y 10 15 2014
	City Si BRONXVILLE M		Zip Code 10708-4200	Transaction ID : SA11AI.18398
ARSENAL CAPITAL MANAGMENT INVESTOR		С		Amount of Each Receipt this Period
		Occupation INVESTOR		
		ycle-to-Date	—	
	Primary X General Other (specify)		5000.00]
s	UBTOTAL of Receipts This Page (optional)			3025.00
T	OTAL This Period (last page this line number	only)		

IT Ar				FOR LINE NUMBER: PAGE 31 OF 67 (check only one) X 11a 11b 11c 11d 12 13a 13b 14 15 person for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committe	ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) DR. ROBERT NEWBORN Mailing Address 39 MAYBERRY ROAD			Date of Receipt
	City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID : SA11AI.18292
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer DANBURY HOSPITAL	Occupation PHYSICIAN		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1250.00]
В.	Full Name (Last, First, Middle Initial) DANIEL NICOLL Mailing Address + DANG/ISW/DDI//5			Date of Receipt
	Mailing Address 4 BAYVIEW DRIVE	10 09 / Y Y Y Y 2014		
	City PLAINVIEW	State NY	Zip Code 11803	Transaction ID : SA11AI.18312
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		100.00
	CIGNA HEALTHCARE Receipt For: 2014	PHYSICIAN		
	Primary General Other (specify)		ycle-to-Date 300.00]
<u>с.</u>	Full Name (Last, First, Middle Initial) DR. MARK A. NOGUEIRA			Date of Receipt
	Mailing Address 25 HUNT FARM ROAD			10 08 2014
	City WACCABUC	State NY	Zip Code 10597	Transaction ID : SA11AI.18306
	FEC ID number of contributing federal political committee. C Name of Employer Occupation MOUNT KISCO MEDICAL GROUP UROLOG Receipt For: 2014			Amount of Each Receipt this Period
				1000.00
			ycle-to-Date	
	Primary X General Other (specify)		2500.00]
s	UBTOTAL of Receipts This Page (optional)			1600.00
1	OTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	tatements m	Use separate schedule(s) for each category of the Detailed Summary Page av not be sold or used by any i	FOR LINE NUMBER: PAGE 32 OF 67 (check only one) Image: Additional state of the state o
		name and a		e to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) DANIEL O'KANE Mailing Address 15 SOLURI LANE			Date of Receipt
	City TOMKINS COVE	State NY	Zip Code 10986	Transaction ID : SA11AI.18447
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer O'KANE CONSTRUCTION, INC.	Occupation C.E.O.		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1550.00	
в.	Full Name (Last, First, Middle Initial) DANIEL ODEA			Date of Receipt
	Mailing Address 2TACONIC VIEW CT	10 / D D / Y Y Y Y 10 03 2014		
	City LAGRANGEVILLE	State NY	Zip Code 12540	Transaction ID : SA11AI.18273
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	HEART CENTER Receipt For: 2014	PHYSICIAN	vcle-to-Date	
	Primary X General Other (specify)		1000.00	
с.	Full Name (Last, First, Middle Initial) SCOTT MCALISTER REAGAN			Date of Receipt
	Mailing Address 3340 TOLEDO TERRACE APT. 468			10 13 2014
	City HYATTSVILLE		Zip Code 20782	Transaction ID : SA11AI.18379
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer O			100.00
			vcle-to-Date	
	Primary X General Other (specify)		1250.00	
s	UBTOTAL of Receipts This Page (optional)			1400.00
т	OTAL This Period (last page this line number of	only)		

I

IT Ar				FOR LINE NUMBER: PAGE 33 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 13a 13b 14 15 person for the purpose of soliciting contributions
or	for commercial purposes, other than using th NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committ	ee to solicit contributions from such committee.
Α.	A. JONATHAN R. REYNOLDS Mailing Address P.O. BOX 130 City State GARRISON NY FEC ID number of contributing federal political committee.			Date of Receipt
			Zip Code 10524	Transaction ID : SA11AI.18309
				Amount of Each Receipt this Period
	Name of Employer SELF-EMPLOYED	Occupation WRITER	1	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 3000.00]
В.	Full Name (Last, First, Middle Initial) FRANK E. RICHARDSON			Date of Receipt
	Mailing Address 245 PARK AVENUE 41ST FLOOR	10 / Y Y Y Y Y 10 15 2014		
	City NEW YORK	State NY	Zip Code 10167	Transaction ID : SA11AI.18432
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		
	F.E. RICHARDSON & CO.	INVESTOR		_
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 2600.00	1
с.	Full Name (Last, First, Middle Initial) PATRICIA ROMANO			Date of Receipt
	Mailing Address 113 BUXTON RD			10 08 2014
	City BEDFORD HILLS	State NY	Zip Code 10507	Transaction ID : SA11AI.18302
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of EmployerOccupaFRESENIUS MEDICAL CAREPATHO		GIST	500.00
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1350.00]
s	UBTOTAL of Receipts This Page (optional)			4100.00
т	OTAL This Period (last page this line number	only)		, ,

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LIN (check o	· · ·	R: PAGE	34 OF	67
_			Detailed Summary Page	12	13a	13b	14	15
	y information copied from such Reports and for commercial purposes, other than using t							
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWOR							
<u> </u>	Full Name (Last, First, Middle Initial) MATTHEW ROTHFLEISCH			Date	of Receipt			
	Mailing Address 3 EDWARDS COURT			м 10	M / D		2014	Y
	City State BEDFORD CORNERS NY		Zip Code 10549	Transa	ction ID : S	SA11AI.182	99	
	FEC ID number of contributing federal political committee.	С		Amou	int of Each	Receipt th	is Period	_
	Name of Employer DEL MAR ASSET MANAGEMENT	Occupation PORTFOL	n IO MANAGER	٦L.			1000.0	00
	Receipt For: 2014	Election C	ycle-to-Date	_				
	Primary X General Other (specify)		3600.00]				
В.	Full Name (Last, First, Middle Initial) LEONARD RUSS	Date	of Receipt					
ے.	Mailing Address 8 WINDRUSH LANE					D / Y D1	2014	Y
	City WESTPORT	State Zip Code CT 06880-2301			Transaction ID : SA11AI.18248			
	FEC ID number of contributing federal political committee.	С		Amou	unt of Each	n Receipt th	is Period	
	Name of Employer	Occupation	n	- L.	,	7	1000.	00
	BAYBERRY NURSING HOME	PARTNER	& ADMINISTRATOR	_				
	Receipt For: 2014	Election C	ycle-to-Date	_				
	Primary X General Other (specify)		1000.00]				
— c.	Full Name (Last, First, Middle Initial) DEAN RYDER			Date	of Receipt			
51	Mailing Address P.O. BOX 10			M 10		D / Y 15	2014	Y
	City CARMEL	State NY	Zip Code 10512-0010	Transa	ction ID : S	SA11AI.184	21	
	FEC ID number of contributing		10012-0010	_				
	FEC ID number of contributing federal political committee. C Name of Employer Occupation PUTNAM COUNTY NATIONAL BANK OWNER Receipt For: 2014 Primary X General			Amou	unt of Each	n Receipt th		00
			n] L.			1500.	00
			ivele to Date	_				
			ycie-io-Dale					
	Other (specify)		2500.00					
s	UBTOTAL of Receipts This Page (optional)				,	,	3500.0	00
т	OTAL This Period (last page this line numbe	r only)			,	,		

IT Ar				FOR LINE NUMBER: PAGE 35 OF 67 (check only one) I1a I1a 11b I2 I3a I3b I4 I5 person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT				
Α.	Full Name (Last, First, Middle Initial) DR. JEFFREY SCHILLER Mailing Address 452 W. 19TH STREET, #3C			Date of Receipt	
	City State NEW YORK NY FEC ID number of contributing federal political committee.		Zip Code 10011	10 01 2014 Transaction ID : SA11AI.18247	
				Amount of Each Receipt this Period	
	Name of Employer SELF	Occupation PHYSICIAN			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 650.00]	
В.	Full Name (Last, First, Middle Initial) RICHARD B. SMITH Mailing Address 14 BROOK HILLS CIRCLE			Date of Receipt	
	City WHITE PLAINS	State Zip Code			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer LSTA	Occupation EXECUTIVI	E DIRECTOR	250.00	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 500.00]	
<u>с.</u>	Full Name (Last, First, Middle Initial) DR. ROBERT SOLEY			Date of Receipt	
	Mailing Address 30 GRIFFEN AVE.			M M / D D / Y Y Y Y 10 05 2014	
	City SCARSDALE	State NY	Zip Code 10583	Transaction ID : SA11AI.18284	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer RETIRED	Occupation RETIRED		250.00	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 750.00]	
5	UBTOTAL of Receipts This Page (optional)				
1	OTAL This Period (last page this line number	only)			

IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	Statements m	Use separate schedule(s) for each category of the Detailed Summary Page nay not be sold or used by any	FOR LINE NUMBER: PAGE 36 OF 67 (check only one) I1a 11b 11c 11d I1a 11b 11c 11d 11d I2 I3a I3b 14 15 person for the purpose of soliciting contributions		
or	for commercial purposes, other than using th NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT		address of any political committe	e to solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) ROBERT SPURNY Mailing Address 3834 N PASEO DEL SOL			Date of Receipt		
	City MESA	State AZ	Zip Code 85207	10 10 2014 Transaction ID : SA11AI.18342		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer SELF	Occupation OPHTHAL	n MOLOGIST			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 400.00			
в.	Full Name (Last, First, Middle Initial) WILLIS H. STEPHENS Mailing Address P.O. BOX 371			Date of Receipt		
	City BREWSTER	State NY	Zip Code 10509	10 11 2014 Transaction ID : SA11AI.18361		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer RETIRED	Occupation RETIRED	1			
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 600.00			
— c.	Full Name (Last, First, Middle Initial) KATHRYN M. SUTTON			Date of Receipt		
-	Mailing Address 11508 MORNING RIDE DR.		Zip Code	10 / Y Y Y Y 2014		
	РОТОМАС	State MD	20854	Transaction ID : SA11AI.18429		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer MORGAN LEWIS'S ENGERGY PRACTICE Receipt For: 2014	Occupation ATTORNE				
	Primary X General Other (specify)		500.00]		
s	UBTOTAL of Receipts This Page (optional)	850.00				
1	OTAL This Period (last page this line number	only)				

IT Ar				FOR LINE NUMBER: PAGE 37 OF 67 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only only one) Image: Check only one) Image: Check only only only only only only only only
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT			
Α.	Full Name (Last, First, Middle Initial) DR. MICHAEL TEDFORD Mailing Address 5 BIRCHWOOD COURT City WASHINGTONVILLE	State NY	Zip Code 10992	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer SELF-EMPLOYED Receipt For: 2014 Primary X General Other (specify)	C Occupation PHYSICIAI Election C		Amount of Each Receipt this Period
в.	Full Name (Last, First, Middle Initial) MS. IRIT MIZRACHI TRATT Mailing Address 822 NORTH ST. City	State	Zip Code	Date of Receipt
	GREENWICH FEC ID number of contributing federal political committee. Name of Employer HOMEMAKER Receipt For: 2014 Primary X General Other (specify)	CT Occupation HOMEMAK Election C		Amount of Each Receipt this Period
C.	Full Name (Last, First, Middle Initial) DR. CHARLES TRESSLER Mailing Address 3 ROSEMARY COURT City	State	Zip Code	Date of Receipt
	YORKTOWN HEIGHTS FEC ID number of contributing federal political committee. Name of Employer PFIZER	NY C Occupation PHYSICIAI		Amount of Each Receipt this Period
s	Receipt For: 2014 Primary X General Other (specify) GUBTOTAL of Receipts This Page (optional)		ycle-to-Date 750.00	1600.00
Г	OTAL This Period (last page this line number	only)		

IT Ar				FOR LINE NUMBER: PAGE 38 OF 67 (check only one) Image: Amount of the state of the stat
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWOR			
Α.	Full Name (Last, First, Middle Initial) ARTHUR T. TROVEI Mailing Address 21 RTE. 6 City	State	Zip Code	Date of Receipt
	PORT JERVIS NY FEC ID number of contributing federal political committee. C		12771-2330	
				Amount of Each Receipt this Period
	Name of Employer ARTHUR TROVEI & SONS INC.	Occupation PRESIDEN		
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 1000.00	1
В.	Full Name (Last, First, Middle Initial) ELAINE ULLRICH			Date of Receipt
	Mailing Address 65 OLD ASPETONG RD			10 13 2014
	City KATONAH	State NY	Zip Code 10536	Transaction ID : SA11AI.18380
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	า	
	RETIRED	RETIRED		
	Receipt For: 2014 Primary X General	Election C	ycle-to-Date	
	Other (specify)		850.00	
c.	Full Name (Last, First, Middle Initial) MR. SCOTT VALLAR			Date of Receipt
	Mailing Address 108 GUARD HILL ROAD			10 10 / Y Y Y Y 10 10 2014
	City	State	Zip Code	Transaction ID : SA11AI.18319
	BEDFORD CORNERS	NY	10549	
	FEC ID number of contributing federal political committee. C Name of Employer Occupation GUARD HILL ADVISORS PRESIDEN Receipt For: 2014 Primary X General			Amount of Each Receipt this Period
			ycle-to-Date	
	Other (specify) 35-			
s	UBTOTAL of Receipts This Page (optional)			1350.00
ן ז	OTAL This Period (last page this line numbe	r only)		L , ,

SCHEDULE A (FEC Form 3)			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 39 OF 67 (check only one) X 11a 11b 11c 11d	
			Detailed Summary Page	12 13a 13b 14 15	
				person for the purpose of soliciting contributions et o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	Н			
<u>А</u> .	Full Name (Last, First, Middle Initial) JASON WEINGARTNER			Date of Receipt	
А.	Mailing Address 20-64 46TH STREET			10 09 2014	
	City ASTORIA	State NY	Zip Code 11105	Transaction ID : SA11AI.18308	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer NEW YORK REPUBLICAN STATE COMMITT	Occupation E EXECUTIV	n /E DIRECTOR	250.00	
	Receipt For: 2014	Election C	ycle-to-Date		
	Other (specify)		250.00		
В.	Full Name (Last, First, Middle Initial) GLENN WERLAU			Date of Receipt	
υ.	Mailing Address 63 MANOR ROAD			10 01 2014	
	City PATTERSON	State NY	Zip Code 12563	Transaction ID : SA11AI.18258	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	
	Name of Employer	Occupation	n		
	WERLATONE INC		E		
	Receipt For: 2014	Election C	ycle-to-Date		
	Primary X General Other (specify)		450.00]	
<u>с.</u>	Full Name (Last, First, Middle Initial) DR. RICHARD C. ZANE			Date of Receipt	
•	Mailing Address 75 14TH STREET, NE			M M / D D / Y Y Y Y 10 10 2014	
	City ATLANTA	State GA	Zip Code 30309	Transaction ID : SA11AI.18354	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period	
	Name of EmployerOccupationATLANTA WOMEN'S HEALTH GROUPPHYSICIAReceipt For:2014PrimaryXGeneral			250.00	
			ycle-to-Date		
	Other (specify)				
s	UBTOTAL of Receipts This Page (optional)	750.00			
Γ,	OTAL This Period (last page this line number			72474.00	
1'	VIAL THIS I CHOU (last page this line humber	onny)			

IT Ar	CHEDULE A (FEC Form 3) EMIZED RECEIPTS			FOR LINE NUMBER: PAGE 40 OF 67 (check only one) 11a 11b 11c 11d 12 13a 13b 14 15
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			to solicit contributions from such committee.
Α.	A. Full Name (Last, First, Middle Initial) CMR POLITICAL ACTION COMMITTEE Mailing Address PO BOX 2485			Date of Receipt
	City SPRINGFIELD	State VA	Zip Code 22152	Transaction ID : SA11C.18416
	FEC ID number of contributing federal political committee.	C co	0469429	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 5000.00	
В.	Full Name (Last, First, Middle Initial) COLLINS FOR CONGRESS			Date of Receipt
	Mailing Address PO BOX 1295	10 13 / Y Y Y Y 2014		
	City GAINESVILLE	State GA	Zip Code 30503	Transaction ID : SA11C.18442
	FEC ID number of contributing federal political committee.	C cod	0502039	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date	_
	Full Name (Last, First, Middle Initial) CONSERVATIVE OPPURTUNITY LEADER	SHIP AND I	ENTERPRISE PAC (COLE PAC)	Date of Receipt
C.	Mailing Address 12176 CHANCERY STATION	CIRCLE		10 / Y Y Y Y 2014
	City RESTON	State VA	Zip Code 20190	Transaction ID : SA11C.18472
	FEC ID number of contributing federal political committee.	Ссо	0404392	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	1000.00
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 2000.00	
	UBTOTAL of Receipts This Page (optional)			2000.00

Т	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NU (check only of 11a 12	ne) 11b X 11c 11d 13a 13b 14 15
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH	name and a			
Α.	Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY Mailing Address 5915 EASTMAN AVENUE SUITE 100 City MIDLAND FEC ID number of contributing federal political committee. Name of Employer	State MI	Zip Code 48640 0350462	Date of Re	Each Receipt this Period
	Receipt For: 2014 Primary X General Other (specify)	Election C	ycle-to-Date 5000.00		
B.	Full Name (Last, First, Middle Initial) FREEDOM AND SECURITY PAC Mailing Address 228 S. WASHINGTON ST., ST City	State	Zip Code	Date of Re	D D / Y Y Y Y 14 / 2014 ID : SA11C.18482
	ALEXANDRIA FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary X General Other (specify)	Occupation	22314 0437061 vycle-to-Date	Amount of	Each Receipt this Period
C.	Full Name (Last, First, Middle Initial) MAKING AMERICA PROSPERC Mailing Address PO BOX 2485 City SPRINGFIELD FEC ID number of contributing federal political committee. Name of Employer	State VA C C0	Zip Code 22152 0445379	_	Exceipt 14 2014 ID : SA11C.18477 Each Receipt this Period 2000.00
	Receipt For: 2014 Primary X General Other (specify) UBTOTAL of Receipts This Page (optional)		ycle-to-Date		7000.00
	OTAL This Period (last page this line number c				, ,

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUI (check only or		
_			Detailed Summary Page	12	13a 13b 14 15	
	ny information copied from such Reports and S for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH					
	Full Name (Last, First, Middle Initial) THE COMMITTEE FOR THE PRES		N OF CAPITALISM			
Α.	Mailing Address PO BOX 65314			Date of Re	Ceipt D D / Y Y Y Y 14 _2014 _	
	City	State DC	Zip Code 20035	Transaction	ID : SA11C.18486	
	WASHINGTON FEC ID number of contributing		20033	_		
	federal political committee.	C CO	0328468	Amount of	Each Receipt this Period	
	Name of Employer	Occupation	1		5000.00	
	Receipt For: 2014	Election C	ycle-to-Date			
	Primary X General Other (specify)		5000.00			
			y			
	Full Name (Last, First, Middle Initial) WHOLESALER-DISTRIBUTOR PAC OF THE NATION	Date of Re	ceint			
В.	Mailing Address 1325 G STREET, N.W. SUITE 1000			Date of he	13 2014	
	City State WASHINGTON DC		Zip Code 20005	Transaction	D : SA11C.18457	
	WASHINGTON DC 2000 FEC ID number of contributing Image: Contributing Image: Contributing		20005			
	federal political committee.	C co	0109306	Amount of	Each Receipt this Period	
	Name of Employer	Occupatior	1		1000.00	
	Receipt For: 2014	Election C	ycle-to-Date			
	Primary X General Other (specify)		1000.00			
			y			
_	Full Name (Last, First, Middle Initial)			Date of Re	ceipt	
C.	Mailing Address			M M /	DD/YYYYY	
	City	State	Zip Code	-		
				 Amount of	Each Receipt this Period	
			1		, <u>,</u>	
			ycle-to-Date	-		
	Other (specify)					
_			, , , , , , , , , , , , , , , , , , , ,			
s	UBTOTAL of Receipts This Page (optional)		6000.00			
					15000.00	
1'	OTAL This Period (last page this line number of	Jilly)			7	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 OF 67 (check only one) 11a 11b 11c X 11d 12 13a 13b 14 15
Ar	NAME OF COMMITTEE (In Full)	e name and a	ay not be sold or used by any address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) NAN HAYWORTH Mailing Address PO BOX 394 City State			Zip Code	Date of Receipt
	FISHKILL FEC ID number of contributing federal political committee.		12524 NY19139	Amount of Each Receipt this Period
	Name of Employer CANDIDATE Receipt For: 2014 Primary X General Other (specify)	Occupation CANDIDAT Election C		IN-KIND: DELIVERY SERVICES
B. City State		State	Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee.	Occupation		Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify)	· · ·	ycle-to-Date]
C.	Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code	Date of Receipt
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Receipt For: Primary General Other (specify)	Ceipt For: Election Cycle-to-Date General		
F	UBTOTAL of Receipts This Page (optional)			33.90

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 OF 67 (check only one) 11a 11b 11c 11d X 12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORT	ne name and		berson for the purpose of soliciting contributions be to solicit contributions from such committee.
A. Full Name (Last, First, Middle Initial) REPUBLICANS INSPIRING SUCCESS & EMI Mailing Address PO BOX 2485 City SPRINGFIELD FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary X General Other (specify)	State VA C C0 Occupation	Zip Code 22152 0567677	Date of Receipt 10 / 15 / 2014 Transaction ID : SA12.18492 Amount of Each Receipt this Period 48.07 JFC TRANSFER: SEE MEMO ENTRIES
Full Name (Last, First, Middle Initial) FREEMAN ZAUSNER Mailing Address PO BOX 728 City WALDOBORO FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: 2014 Primary General Other (specify)	State ME C Occupation RETIRED Election C	Zip Code 04572 n ycle-to-Date 150.00	Date of Receipt 10 02 2014 Transaction ID : SA12.18492.0 Amount of Each Receipt this Period JFC TRANSFER: REPUBLICANS INSPIRING SUCCESS & EMPOWERMENT PROJECT (RISE [MEMO ITEM]
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State C Occupation Election C	Zip Code	Date of Receipt MIM DID Amount of Each Receipt this Period
Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			48.07

ITEMIZED DISBURSEMENTS		Use separate sch for each categor Detailed Summar	/ of the	FOR LINE NUMBER: (check only one) PAGE 45 OF 67 X 17 18 19a 19b 19b 20a 20b 20c 21
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			
Α.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS SERVICES Mailing Address 3 WORLD FINANCIAL CENTER			Date of Disbursement
	City State NEW YORK NY Purpose of Disbursement MERCHANT FEES	Zip Code 10285		Amount of Each Disbursement this Period 849.34 Transaction ID : SB17.18571
	Candidate Name Office Sought: House Disbursement For: Senate President State: District:	X General	Category/ Type	
В.	State: District: Full Name (Last, First, Middle Initial) ALEXANDER ARZOUMANOV Mailing Address 56 COUNTRY CLUB DRIVE			Date of Disbursement
	City State FLORIDA NY Purpose of Disbursement PAYROLL Candidate Name Candidate Name	Zip Code 10921	Category/ Type	Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.18600
	Office Sought: House Disbursement For: Senate Primary President Other (spin) State: District:	General	- Type	
C.	Full Name (Last, First, Middle Initial) ALEXANDER ARZOUMANOV Mailing Address 56 COUNTRY CLUB DRIVE			Date of Disbursement
		p Code 0921		Amount of Each Disbursement this Period 18790.70
	Candidate Name Office Sought: House Senate President State: District:	K General	Category/ Type	Transaction ID : SB17.18601
	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)			23640.04

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one) PAGE 46 OF 67 X 17 18 19a 19b 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			
Α.	Full Name (Last, First, Middle Initial) ATLAS STAR Mailing Address P.O BOX 436			Date of Disbursement
	City State FISHKILL NY Purpose of Disbursement	Zip Code 12524		Amount of Each Disbursement this Period 418.10
	Candidate Name	2011	Category/ Type	Transaction ID : SB17.18572
	Office Sought: House Disbursement Formary President Other (s. State: District:	X General		
В.	Full Name (Last, First, Middle Initial) NICHOLAS BIBLIS Mailing Address 182 COUNTRY CLUB DRIVE			Date of Disbursement
	City State FLORIDA NY Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES	Zip Code 10921	_ · · ·	Amount of Each Disbursement this Period
	Candidate Name Office Sought: House Disbursement For	: 2014 X General	Category/ Type	Transaction ID : SB17.18591
	State: District: Other (s Full Name (Last, First, Middle Initial)	specify)		
C.	Mailing Address 182 COUNTRY CLUB DRIVE			Date of Disbursement
		p Code 0921	· · · ·	Amount of Each Disbursement this Period 621.01
	Candidate Name Office Sought: House Disbursement For		Category/ Type	Transaction ID : SB17.18610
_	State: District: Primary	X General specify)		
	UBTOTAL of Disbursements This Page (optional)			1063.35

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one) PAGE 47 OF 67 X 17 18 19a 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH	person for the purpose of soliciting contributions		
A.	Full Name (Last, First, Middle Initial) NICHOLAS BIBLIS			Date of Disbursement
	Mailing Address 182 COUNTRY CLUB DRIVE			10 15 2014
	City State FLORIDA NY	Zip Code 10921		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL Candidate Name		Catagony	Transaction ID : SB17.18598
	Office Sought: House Disbursement For Senate Primary President Other (s	X General	Category/ Type	
в.	State: District: Full Name (Last, First, Middle Initial) ORYSIA DMYTRENKO			Date of Disbursement
	Mailing Address 77 HILL ROAD	10 / D D / Y Y Y Y 10 15 2014		
	City State GOSHEN NY	Zip Code 10924		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL Candidate Name		Category/	1500.00 Transaction ID : SB17.18603
	Office Sought: House Disbursement For Senate President Other (s State: District:	X General	Туре	
C.	Full Name (Last, First, Middle Initial) ELAVON MERCHANT SERVICES			Date of Disbursement
	Mailing Address 1 CONCOURSE PARKWAY			
	CityStateZip CodeATLANTAGA30328			Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT FEES Candidate Name		Category/	1889.08 Transaction ID : SB17.18580
	Office Sought: House Disbursement For Senate President Other (s State: District:	K General	Туре	
s	UBTOTAL of Disbursements This Page (optional)			4889.08
т	OTAL This Period (last page this line number only)			

ITEMIZED DISBURSEMENTS		Use separate sch for each category Detailed Summan	y of the	FOR LINE NUMBER: (check only one) PAGE 48 OF 67 X 17 18 19a 19b 20a 20b 20c 21
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH			
Α.	Full Name (Last, First, Middle Initial) FLORINDA ESTRADA Mailing Address 3401 WHISPERING HILLS DRIVE			Date of Disbursement
	City State CHESTER NY Purpose of Disbursement PAYROLL	Zip Code 10918		Amount of Each Disbursement this Period 800.00
	Candidate Name Office Sought: House Disbursement For: Senate Primary	: 2014 X General	Category/ Type	Transaction ID : SB17.18602
В.	State: District: Other (s) Full Name (Last, First, Middle Initial) EXECUTIVE STAR	pecify)		Date of Disbursement
	Mailing Address 180 E PROSPECT AVE City State MAMARONECK NY	Zip Code 10543		M M / D D / Y Y Y 10 06 / Y Y Y Y Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE Candidate Name		Category/ Type	81939.54 Transaction ID : SB17.18581
	Office Sought: House Disbursement For: Senate Primary State: District: Other (sp	X General		
C.	Full Name (Last, First, Middle Initial) EXECUTIVE STAR Mailing Address 180 E PROSPECT AVE			Date of Disbursement
		o Code 0543		Amount of Each Disbursement this Period 54557.33
	Candidate Name Office Sought: House Disbursement For: Senate President State: District:	X General	Category/ Type	
	UBTOTAL of Disbursements This Page (optional)			137296.87

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one) PAGE 49 OF 67 X 17 18 19a 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full)			
	FRIENDS OF NAN HAYWORTH			
Α.	Full Name (Last, First, Middle Initial) CONNOR P. GILLIS			Date of Disbursement
	Mailing Address 39 1/2 WATKINS AVE.			10 09 2014
	City State MIDDLETOWN NY	Zip Code 10940		Amount of Each Disbursement this Period
	Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES			451.31 Transaction ID : SB17.18578
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement For Senate Primary President Other (state)	X General		
	State: District: Full Name (Last, First, Middle Initial)			
В.	ORANGE & ROCKLAND			Date of Disbursement
	Mailing Address 390 WEST ROUTE 59			
	City State SPRING VALLEY NY	Zip Code 10977		Amount of Each Disbursement this Period
	Purpose of Disbursement GILLIS REIMBURSEMENT: UTILITIES		· · ·	451.31
	Candidate Name		Category/ Type	[MEMO ITEM]
	Office Sought: House Disbursement For Senate President Other (s State: District:	General		
	Full Name (Last, First, Middle Initial)			
C.				Date of Disbursement
	Mailing Address 39 1/2 WATKINS AVE.			10 15 2014
	-	p Code 0940		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL			2500.00
	Candidate Name		Category/ Type	Transaction ID : SB17.18599
	Office Sought: House Disbursement For Senate President Other (s	K General	<u> </u>	
Г	State: District:			
s	UBTOTAL of Disbursements This Page (optional)			
т	OTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule for each category of t Detailed Summary Pag	e(s) (che he ge	FOR LINE NUMBER: PAGE 50 OF 67 (check only one) X 17 18 19a 19b 20a 20b 20c 21			
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH						
Full Name (Last, First, Middle Initial) A. NAN HAYWORTH Mailing Address PO BOX 394			Date of Disbursement			
City State FISHKILL NY Purpose of Disbursement IN-KIND: DELIVERY SERVICES Candidate Name	Zip Code 12524		Amount of Each Disbursement this Period 33.90 Transaction ID : SB17.18634			
Office Sought: X House Disbursement For Senate President Other (s State: NY District: 18	: 2014 X General	ategory/ Type				
B. Full Name (Last, First, Middle Initial) UNITED STATES POSTAL SERVICE Mailing Address 245 WESTCHESTER AVE			Date of Disbursement			
City State PORT CHESTER NY Purpose of Disbursement HAYWORTH IN-KIND: DELIVERY SERVICES Candidate Name	Zip Code 10573	ategory/	Amount of Each Disbursement this Period 16.95 Transaction ID : SB17.18634.0			
Office Sought: House Disbursement For Senate Primary President Other (s	: 2014 X General	Туре	[MEMO ITEM]			
Full Name (Last, First, Middle Initial) C. UNITED STATES POSTAL SERVICE Mailing Address 245 WESTCHESTER AVE			Date of Disbursement			
	p Code 0573		Amount of Each Disbursement this Period 16.95 Transaction ID : SB17.18634.1			
Office Sought: House Disbursement For Senate Primary President Other (s	: 2014 X General	ategory/ Type	[MEMO ITEM]			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			33.90			

IT Ar	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS by information copied from such Reports and Statements for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH		y of the y Page used by any	
A .	Full Name (Last, First, Middle Initial) ICAMPAIGN LLC Mailing Address 2 GOLDWIN ST			Date of Disbursement
	City State RYE NY Purpose of Disbursement DATA MANAGEMENT SERVICES	Zip Code 10580		Amount of Each Disbursement this Period 8000.00 Transaction ID : SB17.18584
	Candidate Name Office Sought: House Disbursement For Senate President Other State: District:		Category/ Type	
в.	Full Name (Last, First, Middle Initial) JAMESTOWN ASSOCIATES Mailing Address 5 MAPLETON ROAD SUITE 300			Date of Disbursement
	City State PRINCETON NJ Purpose of Disbursement MEDIA PRODUCTION Candidate Name Candidate Name	Zip Code 08540	Category/	Amount of Each Disbursement this Period 20781.80 Transaction ID : SB17.18585
	Office Sought: House Disbursement For Senate President Other State: District: Full Name (Last, First, Middle Initial)		Туре	
C.	JAMESTOWN ASSOCIATES Mailing Address 5 MAPLETON ROAD SUITE 300			Date of Disbursement
	City State PRINCETON NJ Purpose of Disbursement PLACED MEDIA Candidate Name Candidate Name	Zip Code 08540	Category/	Amount of Each Disbursement this Period 137705.00 Transaction ID : SB17.18586
	Office Sought: House Disbursement For Senate Primar President Other State: District:		Туре	
	UBTOTAL of Disbursements This Page (optional)			166486.80

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			y of the ry Page used by any					
	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH							
Α.	Full Name (Last, First, Middle Initial) JAMESTOWN ASSOCIATES			Date of Disbursement				
	Mailing Address 5 MAPLETON ROAD SUITE 300			10 14 2014				
	City State PRINCETON NJ	Zip Code 08540		Amount of Each Disbursement this Period				
	Purpose of Disbursement PLACED MEDIA			137960.00 Transaction ID : SB17.18587				
	Candidate Name		Category/ Type					
	Office Sought: House Disbursement For Senate Primary President Other (s	X General						
	State: District: Full Name (Last, First, Middle Initial)							
В.	MAJORITY STRATEGIES			Date of Disbursement				
	Mailing Address 135 PROFESSIONAL DRIVE, SUITE 104			10 01 2014				
	City State PONTE VEDRA BEACH FL	Zip Code 32082		Amount of Each Disbursement this Period				
	Purpose of Disbursement STRATEGY CONSULTING			4000.00				
	Candidate Name		Category/ Type	Transaction ID : SB17.18588				
	Office Sought: House Disbursement For Senate Primary President Other (s State: District:	General						
c.	Full Name (Last, First, Middle Initial) MEDIA SOLSTICE MARKETING & PUB	LIC RELATIO	ONS	Date of Disbursement				
	Mailing Address 158 PIKE STREET, STE 5			10 / D D / Y Y Y Y 2014				
		p Code 2771		Amount of Each Disbursement this Period				
	Purpose of Disbursement WEB DEVELOPMENT			600.00				
	Candidate Name		Category/ Type	Transaction ID : SB17.18589				
	Office Sought: House Disbursement For Senate President Other (s State: District:	X General	1					
s	UBTOTAL of Disbursements This Page (optional)			142560.00				
Т	OTAL This Period (last page this line number only)							

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 53 OF 67 check only one) Image: Constraint of the second sec			
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWORTH						
A.	Full Name (Last, First, Middle Initial) MID-HUDSON NEWS NETWORK			Date of Disbursement			
	Mailing Address 42 MARCY LANE			10 09 2014			
	City State MIDDLETOWN NY Purpose of Disbursement	Zip Code 10941		Amount of Each Disbursement this Period 450.00			
	PRINT ADVERTISING			Transaction ID : SB17.18590			
	Candidate Name		Category/ Type				
	Office Sought: House Disbursement Formation Senate Primary President Other (state)	X General					
	State: District: Full Name (Last, First, Middle Initial)						
В.	E. O'BRIEN MURRAY			Date of Disbursement			
	Mailing Address 235 WEST 56TH STREET 22H						
	City State NEW YORK NY	Zip Code 10019		Amount of Each Disbursement this Period			
	Purpose of Disbursement STRATEGY CONSULTING			7500.00			
	Candidate Name		Category/ Type	Transaction ID : SB17.18579			
	Office Sought: House Disbursement For: Senate Primary President Other (sp)	General					
	Full Name (Last, First, Middle Initial)						
C.	PAYCHEX			Date of Disbursement			
	Mailing Address 300 WESTAGE BUS. CENTER, STE 130			10 / D D / Y Y Y Y 10 15 2014			
		o Code 2524		Amount of Each Disbursement this Period			
	Purpose of Disbursement PAYROLL SERVICE/TAXES	2324	· · · ·	5037.44			
	Candidate Name	Category/ Type	Transaction ID : SB17.18597				
	Office Sought: House Disbursement For: Senate Primary President Other (sp	X General					
s	UBTOTAL of Disbursements This Page (optional)			12987.44			
т	OTAL This Period (last page this line number only)						

	CHEDULE B (F EMIZED DISBU	-	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one) PAGE 54 OF 67 X 17 18 19a 19b 20a 20b 20c 21			
	for commercial purpose NAME OF COMMITTEE FRIENDS OF N	s, other than using the name and a (In Full) AN HAYWORTH			person for the purpose of soliciting contributions ee to solicit contributions from such committee.			
A.	Full Name (Last, First, M THE POLITICAL	NETWORK			Date of Disbursement			
	Mailing Address P.O. B				10 09 2014			
	City COLUMBUS	State OH	Zip Code 43221		Amount of Each Disbursement this Period			
	Purpose of Disbursement TELEMARKETING & D	nt ATA MANAGEMENT SERVICES			5000.00 Transaction ID : SB17.18593			
	Candidate Name			Category/ Type				
		House Disbursement For Senate Primary President Other (s	X General					
	State: Distri Full Name (Last, First, M							
В.	THE PRINCETO				Date of Disbursement			
	Mailing Address 15 W.	43RD ST						
	City NEW YORK	State NY	Zip Code 10036		Amount of Each Disbursement this Period			
	Purpose of Disburseme FACILITY RENTAL/CA	nt TERING SERVICES		· · ·	627.35			
	Candidate Name			Category/ Type				
		House Disbursement For Senate Primary President Other (s	General					
c.	Full Name (Last, First, N		R		Date of Disbursement			
	Mailing Address P.O. B	OX 489			M M / D D / Y			
	City CHESTER		p Code 0918		Amount of Each Disbursement this Period			
	Purpose of Disburseme RENT				1000.00			
	Candidate Name			Category/ Type	Transaction ID : SB17.18595			
		House Disbursement For Senate Primary President Other (s ct:	K General					
s	UBTOTAL of Disbursem	ents This Page (optional)			6627.35			
т	OTAL This Period (last p	page this line number only)			, ,			

IT An	for commercial purposes, other than usir	and Statements m		y of the y Page used by any	FOR LINE NUMBER: PAGE 55 OF 67 (check only one) I17 18 19a 19b 20a 20b 20c 21 person for the purpose of soliciting contributions ee to solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) FRIENDS OF NAN HAYWC	RTH			
A.	Full Name (Last, First, Middle Initial) WELLS FARGO				Date of Disbursement
	Mailing Address 420 MONTGOMERY ST				10 06 2014
	City SAN FRANCISCO Purpose of Disbursement	State CA	Zip Code 94104		Amount of Each Disbursement this Period
	BANK FEES				Transaction ID : SB17.18596
	Candidate Name			Category, Type	
	Office Sought: House Senate President	Disbursement For Primary Other (s	K General		
	State: District: Full Name (Last, First, Middle Initial)				
В.					Date of Disbursement
	Mailing Address				
	City	State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement				
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement For Primary Other (s	General		
	State: District: Full Name (Last, First, Middle Initial)				
C.	· ········ (, · ····, ········, ·······,				Date of Disbursement
	Mailing Address				
	City	State Zi	p Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			· · · ·	
	Candidate Name			Category, Type	
	Office Sought: House Senate President State: District:	Disbursement For Primary Other (s	General		
	UBTOTAL of Disbursements This Page (potional)			30.00
	OTAL This Period (last page this line num				498566.14

ige# 14952632210					
HEDULE C (FEC ANS	Form 3)			Use separate schedu for each category of Detailed Summary P	of the (check only one) X 13a
ME OF COMMITTEE (In F	,			Trans	saction ID : SC/10.5177
LOAN SOURCE Full Na NAN HAYWORTH	•	ddle Initial)		[PERSONAL FUNDS]	7 Election: 2010 Primary General
Mailing Address PO BOX 394					Other (specify)
City		State	ZIP Code	9	
FISHKILL		NY	12524		
Original Amount of Loan		Cumulative F	Payment To D		Balance Outstanding at Close of This Per
	110000.00			48000.00	62000.00
TERMS Date Incu	rred		Date Due	Interest Ra	ate Secured:
^M 09 ^M / ^D 26 ^D /	Y ŽOOŠ Y	M M / D		JE ŎN ^Y 0.0 MAND	.00 % (apr)
List All Endorsers or Gu		o Loan Sourc			
1. Full Name (Last, First	, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · ·
JBTOTALS This Period Th	age in this line only	/)		······	62000.00

age# 14952632211								
HEDULE C (FEC F	orm 3)			Use separate schedu for each category of		FOR LINE NUMBER:	OF 67	
ANS				Detailed Summary Pa				
ME OF COMMITTEE (In Full) RIENDS OF NAN HA`	YWORTH			Transa	action I	D : SC/10.5180		
LOAN SOURCE Full Name	(Last, First, Mid	Idle Initial)		[PERSONAL FUNDS]	Eleo	ction: 2010		
NAN HAYWORTH						Primary General		
Mailing Address PO BOX 394						Other (specify)		
City		State	ZIP Code	9				
FISHKILL		NY	12524					
Original Amount of Loan		Cumulative F	Payment To D		lance (Dutstanding at Close of T		
<u> </u>	40000.00			0.00		40000).00	
TERMS Date Incurred			Date Due	Interest Ra	te	Secured	:	
M09 / D30 / Y	žooý ^v	M M / D		JE ŎN ^Y 0.0	00	% (apr)	X	
List All Endorsers or Guara		o Loan Sourc						
1. Full Name (Last, First, M	iddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First, Mid	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
				Amount	-		_	
City	State	ZIP Code		Guaranteed Outstanding:	7	· · · · · · · · · · ·	_	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed	-		-	
Oity	State	ZIF COUE		Outstanding:	7	7	_	
JBTOTALS This Period This I	Page (optional)			······ •		40000	D.00	
DTALS This Period (last page	in this line only	·)		······ •				
arry outstanding balance only	y to LINE 3, Sch	edule D, for t	his line. If no	o Schedule D, carry for	ward	to appropriate line of Su	mmary	

age# 14952632212					
HEDULE C (FEC ANS	Form 3)			Use separate schedu for each category of Detailed Summary Pa	the (check only one) X 13a
ME OF COMMITTEE (In F	,			Transa	action ID : SC/10.5181
LOAN SOURCE Full National NAN HAYWORTH	me (Last, First, Mic	ddle Initial)		[PERSONAL FUNDS]	Election: 2010 Primary General
Mailing Address PO BOX 394					Other (specify)
City		State	ZIP Code	9	
FISHKILL		NY	12524		
Original Amount of Loan		Cumulative F	Payment To D	Date Ba	alance Outstanding at Close of This Per
	100000.00			0.00	100000.00
TERMS Date Incur	red		Date Due	Interest Ra	ate Secured:
M 12 ^M / D 31 ^D /	Y 2009 Y	M M / D	D / Y DI	ŬE ŎŇ Ŭ 0.0	
List All Endorsers or Gu		o Loan Sourc		Normal of Englands	
1. Full Name (Last, First	, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
JBTOTALS This Period Th					100000.00

ige# 14952632213								
HEDULE C (FEC ANS	Form 3)			Use separate schedu for each category of Detailed Summary Pa	the (PAGE OR LINE NUME check only one)	ER:	F 67
ME OF COMMITTEE (In F	,			Transa	action ID :	SC/10.5183		
LOAN SOURCE Full Na NAN HAYWORTH	•	dle Initial)		[PERSONAL FUNDS]	Pri	n: 2010 imary eneral		
Mailing Address PO BOX 394						her (specify)		
City FISHKILL		State NY	ZIP Cod	e				
-								
Original Amount of Loar	150000.00	Cumulative I	Payment To [Date Ba 15500.00	lance Out	standing at Clos	e of Thi 134500.	
9 9 9			9 9					
Date Incu	rred ^Y Ž010 ^Y	M M / D		UE ŎN Ŭ		% (apr)	ecured:	\mathbf{X}
List All Endorsers or G	uarantors (if any) t	o Loan Sourc					Yes	N
1. Full Name (Last, First	t, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	7]
2. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	7]
3. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	7]
4. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	7	•]
JBTOTALS This Period TI				· L	7		134500.	00

ige# 14952632214								0= 07
HEDULE C (FEC ANS	; Form 3)			Use separate sc for each categor Detailed Summa	y of the	FOR LINE NU (check only or	MBER:	OF 67
ME OF COMMITTEE (IN F	,			Tr	ansaction	ID : SC/10.5184		
LOAN SOURCE Full Na NAN HAYWORTH	•	ddle Initial)		[PERSONAL FUN		ction: 2010 Primary		
Mailing Address PO BOX 394						General Other (specify)	•	
City		State	ZIP Code	9				
FISHKILL		NY	12524					
Original Amount of Loar		Cumulative F	Payment To D		Balance	Outstanding at C		
	100000.00		7	0.00		7 7	10000	0.00
TERMS Date Incu	rred		Date Due	Interes	st Rate		Secure	d:
M06 / D30 /	Y ŽOIČ Y	M M / D		JE ŎŇ MAND	0.00	% (apr)	Yes	
List All Endorsers or G	uarantors (if any) t	o Loan Sourc	e					
1. Full Name (Last, Firs	t, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
3. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
4. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
JBTOTALS This Period T		/)		·····		7 1 7 7 7 7 7 7 7	10000	* *

age# 14952632215								
HEDULE C (FEC	Form 3)			Use separate so for each catego	ory of the	FOR LINE N (check only o		OF 67
IAME OF COMMITTEE (In Full)				Transaction ID : SC/10.4731				13b
RIENDS OF NAN HA	AYWORTH							
LOAN SOURCE Full Nam	e (Last, First, Mic	ddle Initial)				ction: 2012 Primary		
Mailing Address PO BOX 394				General Other (specify)				
City		State	ZIP Code	•				
FISHKILL		NY	12524					
Original Amount of Loan		Cumulative Payr	nent To D	ate	Balance (Outstanding at	Close of	This Perio
· · · · · · ·	100000.00			0.00			1000	00.00
TERMS Date Incurre		Da	ite Due	Intore	est Rate		Secure	
M 10 ^M / D 29 ^D / Y	ž012 [°]	M M / D D	_	1/2014	0.00			iu.
			12/3			% (apr)	Ye	es N
List All Endorsers or Gua		o Loan Source						
1. Full Name (Last, First,	Middle Initial)		ſ	Name of Employer				
Mailing Address			(Occupation				
				Amount				_
City	State	ZIP Code		Guaranteed Dutstanding:				
2. Full Name (Last, First, N	/liddle Initial)			Name of Employer				
			,	De aurentiene				
Mailing Address				Occupation				
0.1		715.0.1		Amount Guaranteed				
City	State	ZIP Code		Dutstanding:				
3. Full Name (Last, First, N	<i>l</i> iddle Initial)		1	Name of Employer				
Mailing Address			(Occupation				
			1	Amount				_
City	State	ZIP Code		Guaranteed Dutstanding:	7			
4. Full Name (Last, First, N	/liddle Initial)		1	Name of Employer				
Mailing Address			(Occupation				
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7			
UBTOTALS This Period This							1000	00.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4782
LOAN SOURCE Full Name (Last, First, M NAN HAYWORTH	liddle Initial)	Election: 2012 Primary General
Mailing Address PO BOX 394		Other (specify)
City	State ZIP Co NY 12524	de
Original Amount of Loan	Cumulative Payment To	Date Balance Outstanding at Close of This Per
10033.45		0.00 10033.45
TERMS Date Incurred	Date Due	İnterest Rate Secured: ĎEMĂNĎ 0.00 % (apr) X
List All Endorsers or Guarantors (if any)	to Loan Source	Yes Yes
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (optional TOTALS This Period (last page in this line or		

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 14952632216

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4783
LOAN SOURCE Full Name (Last, First, M NAN HAYWORTH	iddle Initial)	Election: 2012 Primary X General
Mailing Address PO BOX 394		Other (specify)
City FISHKILL	State ZIP C NY 1252	
Original Amount of Loan	Cumulative Payment	To Date Balance Outstanding at Close of This Peri
63500.00		0.00 63500.00
TERMS Date Incurred	Date Du	
List All Endorsers or Guarantors (if any)	to Loan Source	DEMAND Yes
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line on		

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 14952632217

ige# 14952632218								
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		PAGE 64 OF 67 FOR LINE NUMBER: (check only one) X 13a 13b			
AME OF COMMITTEE (In Full)				Transaction ID : SC/10.5187				
LOAN SOURCE Full Nam	ne (Last, First, Mic	ddle Initial)		[PERSONAL FUND		ction: 2012 Primary		
Mailing Address PO BOX 394						General Other (specify)	•	
City		State	ZIP Code	9				
FISHKILL		NY	12524					
Original Amount of Loan		Cumulative F	Payment To D	Date	Balance (Outstanding at C	Close of	This Perio
	50000.00			0.00	L		5000	00.00
TERMS Date Incurre	ed		Date Due	Interest	Rate		Secure	d:
M04 ^M / D22 ^D / Y	Ž013 Y	M M / D	D / Y DI	- I as I as I	0.00	% (apr)	Ye	\times
List All Endorsers or Gua		o Loan Sourc						
1. Full Name (Last, First,	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	7			
2. Full Name (Last, First, I	Viddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
3. Full Name (Last, First, I	Viddle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, First, I	Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
JBTOTALS This Period This	ge in this line only	/)				7 7 7 7 7 7		00.00

ige# 14952632219								
CHEDULE C (FEC Form 3) DANS			Use separate schedul for each category of Detailed Summary Pa					
ME OF COMMITTEE (IN I RIENDS OF NAN H	,			Transaction ID : SC/10.14516				
LOAN SOURCE Full Na NAN HAYWORTH	•	ddle Initial)		[PERSONAL FUNDS]	Election: 2014 X Primary General			
Mailing Address PO BOX 394					Other (specify)			
City		State	ZIP Code	e				
FISHKILL		NY	12524					
Original Amount of Loar	l	Cumulative F	Payment To D	Date Bal	lance Outstanding at Close of This Perio			
	8527.39			0.00	8527.39			
TERMS Date Incu	rred		Date Due	Interest Rat	te Secured:			
M 09 / D 30 /	Ý 2013 Ý	M M / D	D / Y DI	ĴE ŎŇ Ŭ 0.0				
List All Endorsers or G		o Loan Sourc						
1. Full Name (Last, Firs	t, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 m 1			
2. Full Name (Last, First	, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 a 1			
3. Full Name (Last, First	, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 m 1			
4. Full Name (Last, First	, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 1 9 1 1 M 1			
JBTOTALS This Period T DTALS This Period (last p				·	8527.39			

age# 14952632220							
CHEDULE C (FEC Form 3) OANS				Use separate sched for each category of Detailed Summary F	(check only one) X 13a		
ME OF COMMITTEE (In Ful RIENDS OF NAN HA	,			Trans	saction ID : SC/10.16432		
LOAN SOURCE Full Nam	e (Last, First, Mic	Idle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General		
Mailing Address PO BOX 394					Other (specify)		
City		State	ZIP Code	•			
FISHKILL		NY	12524				
Original Amount of Loan	500000.00	Cumulative P	Payment To D	ate B	alance Outstanding at Close of This Perio 500000.00		
7-7-7-		9	9		<u> </u>		
TERMS Date Incurre			Date Due	Interest R			
M06 / D30 / Y	Ž014 [×]	M M / D		IE ÓN ^Ý 0. MAND	.00 (apr) (apr)		
List All Endorsers or Gua	rantors (if any) to	o Loan Source			Yes No		
1. Full Name (Last, First, I	Viddle Initial)		1	Name of Employer			
Mailing Address			(Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Dutstanding:	- g - 1 - g - 1 - g - 1 - g - 1		
2. Full Name (Last, First, M	liddle Initial)		1	Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Dutstanding:	· · · · · · · · ·		
3. Full Name (Last, First, M	liddle Initial)		1	Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed			
4. Full Name (Last, First, N	liddle Initial)			Dutstanding:			
• • • •							
Mailing Address			(Dccupation			
City	State	ZIP Code		Amount Guaranteed Dutstanding:			
JBTOTALS This Period This	Page (optional)			Г	500000.00		
				i	1400500.04		
DTALS This Period (last pag	e in this line only	′)		••••• L	1168560.84		

SCHEDULE D (FEC Form 3)		(Use separate	PAGE 67 OF 67	
DEBTS AND OBLIGATIONS Excluding Loans	schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one) 9 X 10		
FRIENDS OF NAN HA				
A. Full Name (Last, First, Middle Initial) of Debto CAMPAIGN SOLUTIONS	or or Creditor		ebt (Purpose): CONSULTING	
Mailing Address 117 NORTH SAINT ASAPH ST	REET			
City State ALEXANDRIA	Zip Code VA 22314			
Outstanding Balance Beginning This Period		Transacti	on ID : SD10.16433	
1758.64				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.00	1758.64	
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
		<u> </u>	-y	
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
	7 7 7		y y y y y	
1) SUBTOTALS This Period This Page (optional)		F	1758.64	
2) TOTALS This Period (last page this line number	only)	.	1758.64	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	····· •	1168560.84	
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page	only) 🕨	1170319.48	

Image# 14952632221

FEC Schedule D (Form 3) (Revised 02/2003)