

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
RANGEL VICTORY FUND

ADDRESS (number and street) 818 CONNECTICUT AVENUE NW STE 1100  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** C00452045  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Phu Huynh  
Signature of Treasurer Electronically Filed by Phu Huynh Date 07 15 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
RANGEL VICTORY FUND

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		2000.00
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	1965.00									
(c) Total Receipts (from Line 19) .....	69300.00	69300.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	71265.00	71300.00								
7. Total Disbursements (from Line 31) .....	2807.10	2842.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	68457.90	68457.90								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
RANGEL VICTORY FUND

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	48800.00	48800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	48800.00	48800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	20500.00	20500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	69300.00	69300.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	69300.00	69300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	69300.00	69300.00

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2807.10	2842.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2807.10	2842.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2807.10	2842.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2807.10	2842.10

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	69300.00	69300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	69300.00	69300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2807.10	2842.10
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2807.10	2842.10

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**RANGEL VICTORY FUND**

**A.**

Full Name (Last, First, Middle Initial) Frank J. Guarini		Date of Receipt MM / DD / YYYY 06 / 26 / 2009
Mailing Address 30 Montgomery Street 15th Floor		<b>Transaction ID:</b> SA11AI.5357
City Jersey City	State NJ	Zip Code 07302
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Guarini & Guarini	Occupation Lawyer	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**B.**

Full Name (Last, First, Middle Initial) Robert J.S. Harris		Date of Receipt MM / DD / YYYY 06 / 26 / 2009
Mailing Address 1727 Hamilton Drive		<b>Transaction ID:</b> SA11AI.5383
City Valley Forge	State PA	Zip Code 19841
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 9800.00
Name of Employer RTD Embedded Technologies Inc.	Occupation Founder	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9800.00	

**C.**

Full Name (Last, First, Middle Initial) Christopher Drake Heinz		Date of Receipt MM / DD / YYYY 06 / 26 / 2009
Mailing Address 1101 Pennsylvania Avenue, NW Suite 350		<b>Transaction ID:</b> SA11AI.5348
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Rosemont Capital LLC	Occupation Partner	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>13300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**RANGEL VICTORY FUND**

**A.**

Full Name (Last, First, Middle Initial) Harry P. Kamen		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	6		2	0	0	9													
Mailing Address 910 Park Avenue		<b>Transaction ID:</b> SA11AI.5377																				
City State Zip Code New York NY 10075	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>		2500.00																			
2500.00																						
FEC ID number of contributing federal political committee. <b>C</b>	Contribution																					
Name of Employer N/A Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>		2500.00																				
2500.00																						

**B.**

Full Name (Last, First, Middle Initial) John Menke		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	6		2	0	0	9													
Mailing Address 255 California Street 10th Floor		<b>Transaction ID:</b> SA11AI.5379																				
City State Zip Code San Francisco CA 94111	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>		2500.00																			
2500.00																						
FEC ID number of contributing federal political committee. <b>C</b>	Contribution																					
Name of Employer Menke & Associates Occupation Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>		2500.00																				
2500.00																						

**C.**

Full Name (Last, First, Middle Initial) Edward L. Moses		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	6		2	0	0	9													
Mailing Address 5456 Conner Drive		<b>Transaction ID:</b> SA11AI.5350																				
City State Zip Code Oxnard CA 93033	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2000.00</td></tr> </table>		2000.00																			
2000.00																						
FEC ID number of contributing federal political committee. <b>C</b>	Contribution																					
Name of Employer Housing Auth., San Buenaventura Occupation CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2000.00</td></tr> </table>		2000.00																				
2000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"> <tr><td><b>7000.00</b></td></tr> </table>	<b>7000.00</b>
<b>7000.00</b>		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

**A.**

Full Name (Last, First, Middle Initial)  
Howard J. Rubenstein

Mailing Address 1345 6th Avenue

City State Zip Code  
New York NY 10105

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

Name of Employer: Rubenstein Associates  
Occupation: Public Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

Transaction ID: SA11AI.5344

Amount of Each Receipt this Period  
5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Barbara A. Scott

Mailing Address 345 W. 145th Street  
Apt. 9A3

City State Zip Code  
New York NY 10031

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

Name of Employer: N/A  
Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

Transaction ID: SA11AI.5371

Amount of Each Receipt this Period  
1250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Shirley E. Scott

Mailing Address 345 W. 145th Street  
Apt. 9A3

City State Zip Code  
New York NY 10031

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

Name of Employer: N/A  
Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

Transaction ID: SA11AI.5369

Amount of Each Receipt this Period  
1250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

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



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

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

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Cornelius Sigety		Date of Receipt
	Mailing Address 1500 Lexington Avenue		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Kenbar Management		Occupation Real Estate	<b>Transaction ID:</b> SA11AI.5374
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>
			Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) David S. Taub		Date of Receipt
	Mailing Address 48 Harbor Park Drive		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Port Washington	NY	11050
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Palm Bay Imports, Inc.		Occupation Executive	<b>Transaction ID:</b> SA11AI.5365
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>
			Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) John Tishman		Date of Receipt
	Mailing Address 147 Mianus River Road		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bedford	NY	10506
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Tishman Realty & Construction		Occupation Real Estate Executive	<b>Transaction ID:</b> SA11AI.5368
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 14  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

**A.**

Full Name (Last, First, Middle Initial)  
Lawrence Tucker

Mailing Address 593 Riversville Road

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Brown Brothers Harriman Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11AI.5373

Amount of Each Receipt this Period  
5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Stuart White

Mailing Address P.O. Box 428

City State Zip Code  
Hogansburg NY 13655

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11AI.5346

Amount of Each Receipt this Period  
1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Bernard Winograd

Mailing Address 103 E. 75th Stret  
Apt. # 9

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Prudential Insurance Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11AI.5375

Amount of Each Receipt this Period  
5000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>48800.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 14  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
AMALGAMATED TRANSIT UNION-COPE

Mailing Address 5025 WISCONSIN AVE. N.W.

City State Zip Code  
WASHINGTON DC 20016

FEC ID number of contributing federal political committee. **C** C00032995

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11C.5364

Amount of Each Receipt this Period  
5000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
CABLEVISION SYSTEMS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 STEWART AVENUE

City State Zip Code  
BETHPAGE NY 11714

FEC ID number of contributing federal political committee. **C** C00197863

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11C.5358

Amount of Each Receipt this Period  
5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
HIGH-NEED HOSPITAL PAC INC; THE

Mailing Address 12 STUYVESANT OVAL APT 9A

City State Zip Code  
NEW YORK NY 10009

FEC ID number of contributing federal political committee. **C** C00345017

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2009

**Transaction ID:** SA11C.5353

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 14  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE

Mailing Address 158-29 GEORGE MEANY BOULEVARD

City State Zip Code  
HOWARD BEACH NY 11414

FEC ID number of contributing federal political committee. **C** C00327478

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: SA11C.5367

Amount of Each Receipt this Period  
2500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT

Mailing Address 815 16th St., NW, Suite 600

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003160

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: SA11C.5360

Amount of Each Receipt this Period  
2500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
SHEET METAL WORKERS INTERNATIONAL ASSOCIATION LOCAL 28 POLITICAL ACTION COMMITTEE

Mailing Address 500 Greenwich Street

City State Zip Code  
New York NY 10013

FEC ID number of contributing federal political committee. **C** C00169490

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: SA11C.5386

Amount of Each Receipt this Period  
2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7500.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) THEATRICAL PROTECTIVE UNION LOCAL NO ONE IATSE NEW YORK CITY STAGEHANDS PAC Mailing Address 320 WEST 46TH STREET City State Zip Code NEW YORK NY 10036 FEC ID number of contributing federal political committee. C C00325639 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 9 Transaction ID: SA11C.5362 Amount of Each Receipt this Period 500.00 Contribution
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	20500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 14

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

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NAME OF COMMITTEE (In Full)  
RANGEL VICTORY FUND

A.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Transaction ID: SB21B.5384  
Date of Disbursement

Mailing Address P.O. Box 390728

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	9

City State Zip Code  
Cambridge MA 02139

Amount of Each Disbursement this Period

782.10
--------

Purpose of Disbursement  
Credit card processing fee  
Candidate Name

001
Category/ Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Oldaker Belair & Wittie LLP

Transaction ID: SB21B.5342  
Date of Disbursement

Mailing Address 818 Connecticut Avenue, NW  
Suite 1100

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	9

City State Zip Code  
Washington DC 20006

Amount of Each Disbursement this Period

2025.00
---------

Purpose of Disbursement  
Legal/Accounting fees  
Candidate Name

001
Category/ Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

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

2807.10
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TOTAL This Period (last page this line number only) ..... ►

2807.10
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