

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Espailat for Congress

ADDRESS (number and street) 210 Sherman Avenue
Suite B
 Check if different than previously reported. (ACC) New York NY 10034

2. **FEC IDENTIFICATION NUMBER** C C00518365 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
NY 13

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 24 / 2014 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 06 / 04 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mr. Rafael Lantigua
Signature of Treasurer Mr. Rafael Lantigua *[Electronically Filed]* Date 06 / 13 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Espallat for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 04 / 2014

	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))....	187750.65	521334.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	4850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	187750.65	516484.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	248353.49	338871.56
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	248353.49	338871.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	160918.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	22823.23	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Espallat for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	176694.65	486967.01
(ii) Unitemized.....	11056.00	33367.00
(iii) TOTAL of contributions from individuals ▶	187750.65	520334.01
(b) Political Party Committees.....	0.00	1000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	187750.65	521334.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	187750.65	521334.01

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	248353.49	338871.56
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	4850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4850.00
21. OTHER DISBURSEMENTS	140.00	1800.28
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	248493.49	345521.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	221661.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	187750.65
25. SUBTOTAL (add Line 23 and Line 24).....	409412.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	248493.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	160918.55

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Dhabah Almontaser

Mailing Address 719 Westminster Rd

City State Zip Code
Brooklyn NY 11230-2401

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

Name of Employer Occupation
NYC DOE Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEB00

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Naji Almontaser

Mailing Address 719 Westminster Rd

City State Zip Code
Brooklyn NY 11230-2401

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

Name of Employer Occupation
NY hilton Hotel Banquet Captain

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDHC9

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
American Federation of Teachers COPE-Voluntary A/C

Mailing Address 555 New Jersey Ave NW

City State Zip Code
Washington DC 20001-2029

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : VNJ3JCR5WN6

Amount of Each Receipt this Period
5000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Anthony Argento

Mailing Address 303 Meserole Avenue

City State Zip Code
Brooklyn NY 11206-1732

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

Name of Employer Occupation
Broadway Stages CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEN28

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Leopoldo Baez

Mailing Address 48 Carthage Rd

City State Zip Code
Scarsdale NY 10583-7010

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

Name of Employer Occupation
US Tech Construction corp President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSJ91

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Paul F Balser

Mailing Address 140 Riverside Dr
10A

City State Zip Code
New York NY 10024-2605

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

Name of Employer Occupation
Ironwood Partners Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : VNJ3JCR5WJ2

Amount of Each Receipt this Period
1500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Lewis Barbanel

Mailing Address 1024 Broadway

City Woodmere State NY Zip Code 11598-1228

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

Name of Employer BRM Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : VNJ3JCRWHV1

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dennie Beach

Mailing Address 1760 2nd Ave Apt 22C

City New York State NY Zip Code 10128-5396

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

Name of Employer ASG Global Trade Inc Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : VNJ3JCR5WG6

Amount of Each Receipt this Period
 250.00

* In-Kind: Two laptop computers

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

Mailing Address 1760 2nd Ave Apt 22C

City New York State NY Zip Code 10128-5396

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

Name of Employer ASG Global Trade Inc Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSTAV4

Amount of Each Receipt this Period
 940.00

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

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

1440.00

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

Form/Schedule: SA11AI

Transaction ID : VNJ3JCR5WG6

Two laptop computers valued at \$250.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Dennie Beach

Mailing Address 1760 2nd Ave
Apt 22C

City New York State NY Zip Code 10128-5396

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

Name of Employer ASG Global Trade Inc Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3540.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCWA5P1

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Glenn D Bellitto

Mailing Address 352 Pondfield Rd

City Bronxville State NY Zip Code 10708-4313

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

Name of Employer Acacia Network Occupation Controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDEB5

Amount of Each Receipt this Period
250.00

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

Mailing Address 7 Rosa Dr

City White Plains State NY Zip Code 10607-2518

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

Name of Employer Self Employed Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDAX8

Amount of Each Receipt this Period
500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Edward Bergman

Mailing Address 165 E 32nd St
Apt 16D

City State Zip Code
New York NY 10016-6013

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

Name of Employer Occupation
Innovative Development Services, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : VNJ3JCSEBM4

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Marion Bergman

Mailing Address 104A Middleville Rd

City State Zip Code
Northport NY 11768-2346

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

Name of Employer Occupation
n/a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : VNJ3JCS8ZG7

Amount of Each Receipt this Period
1600.00

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

Mailing Address 610 Nathan Road

City State Zip Code
Mongkok, Hong Kong

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2014

Transaction ID : VNJ3JCTG8K6

Amount of Each Receipt this Period
2600.00

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

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

6800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Rudy Beserra

Mailing Address 1155 Newbridge Trce NE

City Atlanta State GA Zip Code 30319-4554

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

Name of Employer The Coca-Cola Company Occupation Vice President of Latin Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : VNJ3JCRZBD1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Alan Brand

Mailing Address 250 Grand Concourse

City Bronx State NY Zip Code 10451-5430

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

Name of Employer NARCO Freedom Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2014

Transaction ID : VNJ3JCR5TP8

Amount of Each Receipt this Period
500.00

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

Mailing Address 6944 267th St

City Glen Oaks State NY Zip Code 11004-1019

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

Name of Employer CTown Supermarket Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTCSJ6

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

Full Name (Last, First, Middle Initial) A. Manuel Burgos		Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address		Transaction ID : VNJ3JCTCN47
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00
Name of Employer NIS IT Consulting	Occupation IT Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. Ramon F Cabral		Date of Receipt MM / DD / YYYY 06 / 03 / 2014
Mailing Address		Transaction ID : VNJ3JCTEP37
City	State Zip Code	
Bronx	NY 10473	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee.	C	
Name of Employer Audubon Car Service/Owner	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Jose Calderon		Date of Receipt MM / DD / YYYY 06 / 04 / 2014
Mailing Address 647 Colonade Rd		Transaction ID : VNJ3JCSRP90
City	State Zip Code	
West Hempstead	NY 11552-3101	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee.	C	
Name of Employer Hispanic Federation	Occupation Nonprofit Management	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL 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 13 OF 110
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Victor Capellan

Mailing Address 32 Parkside Drive

City Cranston State RI Zip Code 02905-1330

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCTCR01

Amount of Each Receipt this Period
 390.00

* In-Kind: Venue and tickets

B. Full Name (Last, First, Middle Initial)
Angel Cardenas

Mailing Address 1299 Corporate Dr
Apt 1505

City Westbury State NY Zip Code 11590-6650

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

Name of Employer Occupation
A.Q.P. Cleaning & Maintenance Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2014

Transaction ID : VNJ3JCR5VQ9

Amount of Each Receipt this Period
 100.00

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

Mailing Address 1299 Corporate Dr
Apt 1505

City Westbury State NY Zip Code 11590-6650

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

Name of Employer Occupation
A.Q.P. Cleaning & Maintenance Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSS9R9

Amount of Each Receipt this Period
 2500.00

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

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

2990.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Angel Cardenas

Mailing Address 1299 Corporate Dr
Apt 1505

City Westbury State NY Zip Code 11590-6650

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

Name of Employer A.Q.P. Cleaning & Maintenance Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCWA515

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Winston Castillo

Mailing Address 33 Woodbine St

City Yonkers State NY Zip Code 10704-3607

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTFB3

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Rufino B Castro

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCT54

Amount of Each Receipt this Period
1000.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Marcos A. Charles

Mailing Address 3184 Grand Concourse
2B

City State Zip Code
Bronx NY 10458-1054

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2014

Transaction ID : VNJ3JCTG356

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Amod Choudhary

Mailing Address 20 Hillcrest Dr

City State Zip Code
Colts Neck NJ 07722-2227

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

Name of Employer Occupation
CUNY-Lehman College Assistant Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
201.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTFAT8

Amount of Each Receipt this Period
201.00

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

Mailing Address 536 E. 79th Street
10

City State Zip Code
Staten Island NY 10301

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

Name of Employer Occupation
Acacia Network Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTDAJ1

Amount of Each Receipt this Period
250.00

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

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

951.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Collado

Mailing Address 494 Ludingtonville Rd

City	State	Zip Code
Holmes	NY	12531-4626

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

Name of Employer	Occupation
Palero Food Corp.	Retailer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCQVYM2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Samuel Collado

Mailing Address 1404 Michael PI 1F

City	State	Zip Code
Astoria	NY	11103

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

Name of Employer	Occupation
Key Food	CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRC0J6

Amount of Each Receipt this Period
200.00

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

Mailing Address 1786 Adelaide Ct

City	State	Zip Code
East Meadow	NY	11554-3906

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

Name of Employer	Occupation
Acacia Network	Chief Medical Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDAR8

Amount of Each Receipt this Period
250.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Luis Corona

Mailing Address 10 Evergreen Way

City State Zip Code
Glen Head NY 11545-2542

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

Name of Employer Occupation
117 corona meat corp Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : VNJ3JCQXJQ7

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Luis Corona

Mailing Address 10 Evergreen Way

City State Zip Code
Glen Head NY 11545-2542

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

Name of Employer Occupation
117 corona meat corp Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : VNJ3JCWA6M8

Amount of Each Receipt this Period
400.00

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

Mailing Address 39 Wayne Pl

City State Zip Code
Nutley NJ 07110-2815

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

Name of Employer Occupation
Tangoe VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTCWM9

Amount of Each Receipt this Period
2500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Domingo Cruz Vivaldi

Mailing Address Urb. Victor Braegger #20

City San Juan State PR Zip Code 00966

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

Name of Employer San Jorge Children's Hospital Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSYS2

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Gonzalo Cuervo

Mailing Address 101 Hillcrest Dr

City Cranston State RI Zip Code 02921-2619

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

Name of Employer City of Providence Occupation Chief of Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : VNJ3JCPRSF9

Amount of Each Receipt this Period
 100.00

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

Mailing Address 101 Hillcrest Dr

City Cranston State RI Zip Code 02921-2619

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

Name of Employer City of Providence Occupation Chief of Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTERH8

Amount of Each Receipt this Period
 150.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Daus

Mailing Address 156 W 56th St

City State Zip Code
New York NY 10019-3800

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

Name of Employer Occupation
Windels Marx Lane & Mittendorf, LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCSM8B4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Amb. Dr. Francois De Cassagnol

Mailing Address 2260 Homer Ave
The Global Diaspora Superpac

City State Zip Code
Bronx NY 10473-1307

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

Name of Employer Occupation
CyberVillage Corporation Scientist & Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : VNJ3JCPSSN1

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Anne E. De la Renta

Mailing Address 660 Park Ave
Fl 6

City State Zip Code
New York NY 10065-5963

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

Name of Employer Occupation
n/a n/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : VNJ3JCRV3W0

Amount of Each Receipt this Period
2600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Oscar De la Renta		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 27 / 2014
Mailing Address 660 Park Ave FI 6		Transaction ID : VNJ3JCRV3N5
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer self-employed	Occupation fashion designer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. Rosario M De La Rosa		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2014
Mailing Address 223 Madison Ave		Transaction ID : VNJ3JCTFB06
City Cresskill	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NYCDOE	Occupation Assistant Principal	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) C. Ana Del Carmen Garcia		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 06 / 2014
Mailing Address 858 Belmont Ave		Transaction ID : VNJ3JCR5W00
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

SUBTOTAL of Receipts This Page (optional).....	4400.00
TOTAL 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: (check only one)	PAGE 21 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Tomas Del Rio

Mailing Address PO Box 13171

City: Hauppauge State: NY Zip Code: 11788-0710

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

Name of Employer: Acacia Network Occupation: CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 05 / 29 / 2014

Transaction ID : VNJ3JCTDBN7

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Fidel Del Valle

Mailing Address 1536 Ryder St

City: Brooklyn State: NY Zip Code: 11234-3506

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

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 05 / 27 / 2014

Transaction ID : VNJ3JCTCSX3

Amount of Each Receipt this Period: 250.00

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

Mailing Address 70 Durst Pl

City: Yonkers State: NY Zip Code: 10704-1842

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

Name of Employer: El Conde Restaurant Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 30 / 2014

Transaction ID : VNJ3JCTG7T9

Amount of Each Receipt this Period: 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Michael C Deriggs

Mailing Address 213 Washington Ave

City State Zip Code
Brooklyn NY 11205-3702

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

Name of Employer Occupation
Riggs Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDCS0

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Arcadio Diaz

Mailing Address 98 N Cambridge St

City State Zip Code
Malverne NY 11565-2152

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : VNJ3JCTCMP6

Amount of Each Receipt this Period
1000.00

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

Mailing Address 9 Dugan Ln

City State Zip Code
Yonkers NY 10710-1123

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

Name of Employer Occupation
Betts & Beyond Food President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRC053

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Hector L Diaz

Mailing Address 452 Thieriot Ave

City State Zip Code
Bronx NY 10473-3624

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDCW4

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mariano Diaz

Mailing Address 1600 Parker Ave

City State Zip Code
Fort Lee NJ 07024-7010

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

Name of Employer Occupation
C-Town President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRC087

Amount of Each Receipt this Period
 500.00

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

Mailing Address 18 Whispering Pines Dr

City State Zip Code
Mahwah NJ 07430-2029

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

Name of Employer Occupation
Fama Food Corp. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRB5Y4

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Joel Dreifus

Mailing Address 298 Fernwood Ave

City Edison State NJ Zip Code 08837-3839

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

Name of Employer Self-Employed Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSRRW6

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Rafael Duverge

Mailing Address 594 E 25th St

City Paterson State NJ Zip Code 07514-2510

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

Name of Employer Lauren St. Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF8R7

Amount of Each Receipt this Period
 250.00

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

Mailing Address 594 E 25th St

City Paterson State NJ Zip Code 07514-2510

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

Name of Employer Lauren St. Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF8V1

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Arlington Eastmond

Mailing Address 7004 Kennedy Blvd E
Apt 31C

City State Zip Code
Guttenberg NJ 07093-5045

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

Name of Employer Occupation
A.L. Eastmond & Sons Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : VNJ3JCH6RT8

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mark D Ein

Mailing Address 4617 Laverock PI NW

City State Zip Code
Washington DC 20007-2544

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : VNJ3JCTG6Y0

Amount of Each Receipt this Period
2500.00

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

Mailing Address 604 Riverside Dr

City State Zip Code
New York NY 10031-7800

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

Name of Employer Occupation
English & Associates Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : VNJ3JCRG6Z4

Amount of Each Receipt this Period
500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 110
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Ramon Escobar

Mailing Address 105 Sherman Ave

City State Zip Code
White Plains NY 10607-2414

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

Name of Employer Occupation
RSE Management LLC Property Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSMK4

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Martin A Espinal

Mailing Address 67 Royal Way

City State Zip Code
Manhasset HI NY 11040-1230

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTFB95

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Irving A Faccio

Mailing Address 101 Ortega Street
601

City State Zip Code
Guaynabo 00966

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

Name of Employer Occupation
Faccio & Pabon Roca Law Offices Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEMJ2

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 27 OF 110
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Jerry A Farrantino

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTFB47

Amount of Each Receipt this Period
 2500.00

2500.00

B. Full Name (Last, First, Middle Initial)
Carlos E Fernandez

Mailing Address 177 W 83rd St
5E

City State Zip Code
New York NY 10024-5030

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

Name of Employer Occupation
NYC DOE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : VNJ3JCTG5R0

Amount of Each Receipt this Period
 300.00

300.00

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

Mailing Address 1016 Saint Nicholas Ave

City State Zip Code
New York NY 10032-5242

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : VNJ3JCTCMS0

Amount of Each Receipt this Period
 500.00

500.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
David Festi

Mailing Address 3 N Bridge St

City Norwalk State CT Zip Code 06855-1457

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

Name of Employer Acacia Network Occupation Administrator Primary Care

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCS29F7

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joanna Francisco

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTENZ5

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
William S Friedman

Mailing Address 320 Central Park W Apt 18B

City New York State NY Zip Code 10025-7659

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

Name of Employer Beachwold Residential LLC Occupation Real estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : VNJ3JCQBS41

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 29 OF 110

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Friends of Juan Pichardo

Mailing Address 229 Atlantic Ave

City State Zip Code
 Providence RI 02907-1834

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEN77

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Friends of Senator Mary Ellen Goodwin

Mailing Address 325 Smith St

City State Zip Code
 Providence RI 02908-3759

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF7M6

Amount of Each Receipt this Period
 500.00

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

Mailing Address 137 Woodcrest Ave

City State Zip Code
 White Plains NY 10604-2323

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

Name of Employer Occupation
 NYSIF Claims Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : VNJ3JCS8PV4

Amount of Each Receipt this Period
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Mary Fuentes

Mailing Address 1 Valentine Farm Ct

City State Zip Code
Glen Head NY 11545-2539

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRBZT6

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 21 Centre St

City State Zip Code
Bronx NY 10464-1522

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

Name of Employer Occupation
Flair Beverage/Owner Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDF19

Amount of Each Receipt this Period
 600.00

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

Mailing Address 21 Centre St

City State Zip Code
Bronx NY 10464-1522

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

Name of Employer Occupation
Flair Beverage/Owner Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDF42

Amount of Each Receipt this Period
 2600.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Michael Gerstein

Mailing Address 4 Sassafras Ct

City: Voorhees State: NJ Zip Code: 08043-1546

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

Name of Employer: Global One Onvestments, LLC Occupation: Member/Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 06 / 03 / 2014

Transaction ID : VNJ3JCTEM75

Amount of Each Receipt this Period: 2600.00

B. Full Name (Last, First, Middle Initial)
James R Gillespie

Mailing Address 15 Broad St

City: New York State: NY Zip Code: 10005-1923

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

Name of Employer: Tahl Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 05 / 07 / 2014

Transaction ID : VNJ3JCTG748

Amount of Each Receipt this Period: 2500.00

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

Mailing Address 518 Gregory Ave
Apt A207

City: Weehawken State: NJ Zip Code: 07086-5784

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

Name of Employer: Fox Horan & Camerini LLP Occupation: attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 04 / 2014

Transaction ID : VNJ3JCSS881

Amount of Each Receipt this Period: 500.00

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

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

5600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) David Glasel		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2014
Mailing Address 161 Konig Rd		Transaction ID : VNJ3JCTDC20
City Ghent	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hiscock & Barclay LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Leon Goldenberg		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2014
Mailing Address 1360 E 14th St Ste 101		Transaction ID : VNJ3JCSF1Z7
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Goldmont Realty Corp	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) David Gomez		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 29 / 2014
Mailing Address 395 Fort Washington Ave		Transaction ID : VNJ3JCTCXJ4
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation MD	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL 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 33 OF 110
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Edwin R Gomez

Mailing Address 1153 Croes Ave
1R

City State Zip Code
Bronx NY 10472-4516

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTF8F6

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Pablo A Gomez

Mailing Address 472 Abbott Ave

City State Zip Code
Ridgefield NJ 07657-2411

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

Name of Employer Occupation
Malecon Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTFAC8

Amount of Each Receipt this Period
300.00

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

Mailing Address 52 E End Ave
3A

City State Zip Code
New York NY 10028-8096

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTFB22

Amount of Each Receipt this Period
1000.00

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 34 OF 110
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Luis Herrero Acevedo

Mailing Address 155 Carazo 1106

City State Zip Code
Guaynabo 00971

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF9M8

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Soledad Hiciano

Mailing Address 870 Riverside Dr

City State Zip Code
New York NY 10032-5406

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

Name of Employer Occupation
Acacia Network Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDCB1

Amount of Each Receipt this Period
250.00

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

Mailing Address 265 W 14th St
Ste 1802

City State Zip Code
New York NY 10011-7147

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

Name of Employer Occupation
NY State Senate Senator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSX10

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Gonzalia Hughes

Mailing Address 48 Carthage Rd

City Scarsdale State NY Zip Code 10583-7010

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

Name of Employer US Tech Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTFB71

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Reyner Hungria Brito

Mailing Address 632 Warburton Ave
Apt 1H

City Yonkers State NY Zip Code 10701-1634

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

Name of Employer Uptown Social Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCST965

Amount of Each Receipt this Period
500.00

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

Mailing Address 7234 Parkway Dr

City Hanover State MD Zip Code 21076-1307

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : VNJ3JCTCMG9

Amount of Each Receipt this Period
5000.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Amarilis Jacobo

Mailing Address 98 Eisenhower Dr

City State Zip Code
Yonkers NY 10710-1210

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : VNJ3JCTG550

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Juanita Jenyons

Mailing Address 42 Quarry Dr

City State Zip Code
Woodland Park NJ 07424-4201

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

Name of Employer Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : VNJ3JCTG6C8

Amount of Each Receipt this Period
500.00

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

Mailing Address 2 Drake St
Malverne NY11565

City State Zip Code
Malverne NY 11565-1505

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

Name of Employer President Occupation Compare foods

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCR5WT5

Amount of Each Receipt this Period
1000.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Omar Jorge

Mailing Address 5314 Piper Glen Dr

City State Zip Code
Charlotte NC 28277-1326

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

Name of Employer Occupation
500 Foods LLC Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 20 / 2014

Transaction ID : VNJ3JCTCN62

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Kellner

Mailing Address 132 Manhattan Ave

City State Zip Code
New York NY 10025-3801

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

Name of Employer Occupation
N/A retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 12 / 2014

Transaction ID : VNJ3JCMTAJ0

Amount of Each Receipt this Period
500.00

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

Mailing Address 20 E 9th St
Apt 14C

City State Zip Code
New York NY 10003-5944

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

Name of Employer Occupation
Henry Schein, Inc. VP, Global Professional Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSEA0

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 38 OF 110
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Jeff Korek

Mailing Address 15 Campden Rd

City Scarsdale State NY Zip Code 10583-3301

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

Name of Employer Gersowitz Libo & Korek, P.C. Occupation partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSS3K6

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jorge Lamorena

Mailing Address 5 Heller Ct

City Mahwah State NJ Zip Code 07430-2595

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

Name of Employer Apollo Pharmacy Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEPE4

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Marc A. Landis

Mailing Address 337 W 85th St Apt 1B

City New York State NY Zip Code 10024-3858

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

Name of Employer Phillips Nizer LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : VNJ3JCQCPB8

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Marc A. Landis

Mailing Address 337 W 85th St
Apt 1B

City State Zip Code
New York NY 10024-3858

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

Name of Employer Occupation
Phillips Nizer LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1343.65

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2014

Transaction ID : VNJ3JCS8Y67

Amount of Each Receipt this Period
343.65

* In-Kind: Food & Bev

B. Full Name (Last, First, Middle Initial)
Rafael Lantigua

Mailing Address 102 Orchard Ave

City State Zip Code
Emerson NJ 07630-1221

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

Name of Employer Occupation
Columbia. University Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCST362

Amount of Each Receipt this Period
250.00

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

Mailing Address 99 Clinton St

City State Zip Code
Brooklyn NY 11201-4262

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTDGE2

Amount of Each Receipt this Period
2600.00

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

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

3193.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Norman Levy

Mailing Address

City State Zip Code
Brooklyn NY 11201

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDH04

Amount of Each Receipt this Period
 1600.00

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Jose Liberato

Mailing Address 32 Wendover Rd

City State Zip Code
Yonkers NY 10705-2501

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

Name of Employer Occupation
Comerciante

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTD229

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey A Lichtman

Mailing Address 1600 Parker Ave
24G

City State Zip Code
Fort Lee NJ 07024-7010

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

Name of Employer Occupation
Trolman Glaser & Lichtman Atty at Law Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDF92

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Lopez Lopez

Mailing Address 654 Ave Munoz Rivera
Ste 1001

City San Juan State PR Zip Code 00918-4130

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

Name of Employer: Wolf Popper PSC Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSY05

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Jorge Madruga

Mailing Address 15 Verbena Ave
Ste 200

City Floral Park State NY Zip Code 11001-2793

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

Name of Employer: Madd Equities LLC Occupation: RE Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 23 / 2014

Transaction ID : VNJ3JCRKDR8

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 6 Bridle Ct

City Goshen State NY Zip Code 10924-1207

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

Name of Employer: Acacia Network Occupation: Administrator, Quality Improvement

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF8Z2

Amount of Each Receipt this Period
 250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Don Mannig

Mailing Address 49 Stoney Brook Rd

City State Zip Code
Holmdel NJ 07733-1122

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

Name of Employer Occupation
AJ Gallagher Insurance Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTDBV5

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Leo V Martinez

Mailing Address 14 The Blvd

City State Zip Code
New Rochelle NY 10801-2813

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

Name of Employer Occupation
LVM Management Corp. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTD990

Amount of Each Receipt this Period
250.00

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

Mailing Address 2360 Amsterdam Ave

City State Zip Code
New York NY 10033-7362

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

Name of Employer Occupation
Castro Bar Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCST957

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 43 OF 110

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Alejandro Mendez Jr

Mailing Address 1776 Clay Ave

City State Zip Code
 Bronx NY 10457-7239

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

Name of Employer Occupation
 Acacia Network IT Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDCF3

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Luis F Minaya

Mailing Address 20 Sherman Ave
 5A

City State Zip Code
 New York NY 10040-1655

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

Name of Employer Occupation
 Nhs Hardware Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEPJ5

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Lin-Manuel Miranda

Mailing Address 67 Park Ter E
 C80

City State Zip Code
 New York NY 10034-1445

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

Name of Employer Occupation
 5000 Broadway Productions Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCWB7

Amount of Each Receipt this Period
 1500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Montalvo

Mailing Address 71 Hill St

City Bogota State NJ Zip Code 07603-1326

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

Name of Employer Basics inc Occupation Division Controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDDG2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John Morales

Mailing Address 21 Woodridge Dr

City Thiells State NY Zip Code 10984-1614

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTDE65

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mabel Morales-Roca

Mailing Address Calle Toledo 37 Urb Torrimar

City Gu State Gu Zip Code 00966

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

Name of Employer Homemaker Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEB83

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Vanessa Narvaez

Mailing Address 2501 Newtown Ave
Apt 3F

City Astoria State NY Zip Code 11102-2440

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

Name of Employer New York Life Insurance Co. Occupation Financial Services Professional

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRC020

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Robert S. Nelson (rnelson@n

Mailing Address 170 E End Ave

City New York State NY Zip Code 10128-7600

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

Name of Employer Nelson Management Group Ltd Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEM59

Amount of Each Receipt this Period
2000.00

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

Mailing Address 576 W 261st St

City Bronx State NY Zip Code 10471-1028

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

Name of Employer Juani Ortiz Agency, Inc. Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2014

Transaction ID : VNJ3JCHFWJ5

Amount of Each Receipt this Period
20.00

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

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

2270.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Juani Ortiz

Mailing Address 576 W 261st St

City State Zip Code
Bronx NY 10471-1028

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

Name of Employer Occupation
Juani Ortiz Agency, Inc. Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : VNJ3JCHFWR2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jesus Pedrosa Jr

Mailing Address 238 Brinsmade Ave

City State Zip Code
Bronx NY 10465-3202

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

Name of Employer Occupation
Pomesa Inc. Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTDD63

Amount of Each Receipt this Period
250.00

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

Mailing Address 9505 Bluemont Ct

City State Zip Code
Raleigh NC 27617-7787

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

Name of Employer Occupation
CEO Compare

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCSR594

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Luis A Perez

Mailing Address 453 Greenbush Rd

City State Zip Code
Blauvelt NY 10913-1112

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

Name of Employer Occupation
Deliza Pharmacy Inc Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTD1X0

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Yaberci Perez

Mailing Address 32-76 32st.

City State Zip Code

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

Name of Employer Occupation
Acacia Network Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTDC04

Amount of Each Receipt this Period
250.00

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

Mailing Address 2750 Johnson Ave
Apt 6H

City State Zip Code
Bronx NY 10463-4919

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

Name of Employer Occupation
Self Employed President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : VNJ3JCTEMZ4

Amount of Each Receipt this Period
1500.00

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

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

2050.00

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

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

FOR LINE NUMBER: PAGE 48 OF 110
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Roberto L Prats Palerm

Mailing Address 1506 MARTin Travieso

City San Juan State Zip Code 00911

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

Name of Employer RPP Law, PSC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF9S8

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Angela A Pratts

Mailing Address 182 W 180th St

City Bronx State Zip Code NY 10453-2905

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

Name of Employer Elegante Occupation General Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDH88

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Rodney M Propp

Mailing Address 405 Park Ave

City New York State Zip Code NY 10022-4405

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : VNJ3JCR5TK4

Amount of Each Receipt this Period
 2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 49 OF 110
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Santiago Quezada

Mailing Address 258 Rumsey Rd

City State Zip Code
Yonkers NY 10705-1530

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

Name of Employer Occupation
Presidente Euros El Tina

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCSHBP6

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Edwin Qui?ones

Mailing Address 33 Calle Resolucion
Ste 701A

City State Zip Code
San Juan PR 00920-2707

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

Name of Employer Occupation
Qui?ones & Arbona Law Offices Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSYN1

Amount of Each Receipt this Period
1000.00

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

Mailing Address 33 Athboy Dr

City State Zip Code
Marlboro NY 12542-6516

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

Name of Employer Occupation
Self-employed Early Childhood Education Evaluator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : VNJ3JCR7BQ1

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Jona S Rechnitz

Mailing Address 747 3rd Ave

City State Zip Code
New York NY 10017-2803

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

Name of Employer Occupation
SRJ Capital. LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTCS20

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Jona S Rechnitz

Mailing Address 747 3rd Ave

City State Zip Code
New York NY 10017-2803

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

Name of Employer Occupation
SRJ Capital. LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTCS46

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Renew America PAC

Mailing Address 27 Lehigh Ct

City State Zip Code
Rockville Ctr NY 11570-2017

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : VNJ3JCTG6H8

Amount of Each Receipt this Period
2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Retail Wholesale & Dept. Store Union

Mailing Address 30 E 29th St

City New York State NY Zip Code 10016-7925

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDFK1

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mary Richman

Mailing Address 67 Park Ter E
C

City New York State NY Zip Code 10034-1445

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

Name of Employer Occupation
n/a Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : VNJ3JCPREM4

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
David Riv?-Power

Mailing Address B3 Calle A

City San Juan State PR Zip Code 00926-6479

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

Name of Employer Occupation
O'Neill & Borges LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSYX2

Amount of Each Receipt this Period
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Rivera

Mailing Address 362 Hilltop Ave

City Leonia State NJ Zip Code 07605-1109

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

Name of Employer La Union Shipping Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCTE6

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Rivkin Radler LLP

Mailing Address 926 Rxr Plz

City Uniondale State NY Zip Code 11556-0926

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : VNJ3JCPVQN3

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lillian Rodriguez Lopez

Mailing Address 4671 Derby Ln SE

City Smyrna State GA Zip Code 30082-4020

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

Name of Employer The Coca-Cola Company Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : VNJ3JCRVHB6

Amount of Each Receipt this Period
 250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 110	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Lillian Rodriguez Lopez

Mailing Address 4671 Derby Ln SE

City Smyrna State GA Zip Code 30082-4020

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

Name of Employer The Coca-Cola Company Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCSTA18

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Anthony Rodriguez

Mailing Address 325 E 201st St
3L

City Bronx State NY Zip Code 10458-1847

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

Name of Employer NYS Courts Occupation Investigator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 29 / 2014

Transaction ID : VNJ3JCTDBB8

Amount of Each Receipt this Period
250.00

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

Mailing Address 252 Ave Ponce De Leon
Ste 1200

City San Juan State PR Zip Code 00918-2016

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

Name of Employer EDGE Legal Strategies PSC Occupation Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCSSZ21

Amount of Each Receipt this Period
500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Frank Ros

Mailing Address 1737 Patriots Way NW

City Kennesaw State GA Zip Code 30152-4859

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

Name of Employer The Coca-Cola Company Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2014

Transaction ID : VNJ3JCRTV11

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Michael Rosenblum

Mailing Address 5815 Summit St

City Kansas City State MO Zip Code 64113-1141

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

Name of Employer Schur Management Co Ltd Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : VNJ3JCND9S2

Amount of Each Receipt this Period
 2000.00

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

Mailing Address 67 W Bay Dr

City Narragansett State RI Zip Code 02882-2853

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

Name of Employer Moses Afonso Ryan LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF7D0

Amount of Each Receipt this Period
 500.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Samuel Sanchez Figueroa

Mailing Address Urb Ciudad Real #1456

City Vega Baja State PR Zip Code 00693

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

Name of Employer NeAr Integration, LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSYA4

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Samuel S?nchez

Mailing Address AA44 Calle Del Rey

City Toa Alta State PR Zip Code 00953-3661

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

Name of Employer Invensys Process Systems Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSYF3

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Wilfredo Santiago-Capetillo

Mailing Address 858 Calle Las Marias

City San Juan State PR Zip Code 00927

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEKJ9

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Umer Sarwer

Mailing Address 42 Dales Ave
1

City Jersey City State NJ Zip Code 07306-6802

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCSA3

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Umer Sarwer

Mailing Address 42 Dales Ave
1

City Jersey City State NJ Zip Code 07306-6802

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCSB1

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Lee Sepulvado-Ramos

Mailing Address 252 Ponce de Leon

City San Juan State Zip Code 00918

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

Name of Employer Occupation
Sepulvado and Maldonado Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTF9E1

Amount of Each Receipt this Period
750.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Sanjay Shah

Mailing Address 403 Jay Ct

City State Zip Code
Franklin Lakes NJ 07417-2235

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

Name of Employer Occupation
Co-Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEPA2

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Alex Shchegol

Mailing Address 724 Todt Hill Rd

City State Zip Code
Staten Island NY 10304-1327

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

Name of Employer Occupation
ASA College President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCVQ9

Amount of Each Receipt this Period
1500.00

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

Mailing Address 724 Todt Hill Rd

City State Zip Code
Staten Island NY 10304-1327

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

Name of Employer Occupation
VP ASA Institute of Business & Computer T

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : VNJ3JCTCVA7

Amount of Each Receipt this Period
1500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 58 OF 110
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Ronald Sherman

Mailing Address 4250 24th St

City State Zip Code
Long Island City NY 11101-4608

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

Name of Employer Occupation
Midtown Operating Corp President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEKN2

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Pedro P Sime

Mailing Address 165 Sherman Ave

City State Zip Code
New York NY 10034-4602

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

Name of Employer Occupation
Vagano Shipping Corp

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2014

Transaction ID : VNJ3JCTG433

Amount of Each Receipt this Period
 500.00

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

Mailing Address 300 E 56th St

City State Zip Code
New York NY 10022-4136

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

Name of Employer Occupation
225 Oak, LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRB0H9

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Matthew J Sparks

Mailing Address 70 Washington St
12V

City State Zip Code
Brooklyn NY 11201-1442

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : VNJ3JCPVRN5

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Robert J Speyer

Mailing Address 45 Rockefeller Plz

City State Zip Code
New York NY 10111-0100

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

Name of Employer Occupation
Tishman Speyer President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEMB6

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 730 5th Ave

City State Zip Code
New York NY 10019-4105

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

Name of Employer Occupation
Spitzer Engineering Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 13 / 2014

Transaction ID : VNJ3JCR5WR0

Amount of Each Receipt this Period
 2600.00

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

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

7700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Bernard Spitzer

Mailing Address 730 5th Ave

City State Zip Code
New York NY 10019-4105

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

Name of Employer Occupation
Spitzer Engineering Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 13 / 2014

Transaction ID : VNJ3JCR5WS7

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Eliot Spitzer

Mailing Address 730 5th Ave
FI 22

City State Zip Code
New York NY 10019-4105

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

Name of Employer Occupation
spitzer enterprises executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCST9J0

Amount of Each Receipt this Period
2600.00

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

Mailing Address 730 5th Ave
FI 22

City State Zip Code
New York NY 10019-4105

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

Name of Employer Occupation
spitzer enterprises executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : VNJ3JCWBFX7

Amount of Each Receipt this Period
2400.00

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

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

7600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Theresa Stagg

Mailing Address 2 Alyssa Ln

City State Zip Code
Purchase NY 10577-2303

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

Name of Employer Occupation
n/a n/a

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : VNJ3JCS8Q04

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph A Tahl

Mailing Address 1851 7th Avenue #24

City State Zip Code
Brooklyn NY 10026

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : VNJ3JCR5TW6

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Juan Tapia-Mendoza

Mailing Address

City State Zip Code
New York NY 10031

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

Name of Employer Occupation
Self/Doctor Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : VNJ3JCRC0P8

Amount of Each Receipt this Period
250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Jose Taveras

Mailing Address 10214 37th Avenue

City State Zip Code
Fresh Meadows NY 11366

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTEPG9

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Roberto A Tolentino

Mailing Address 143-41 84 Drive
5E

City State Zip Code
Briarwood NY 11435

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

Name of Employer Occupation
Tolentino Realty Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRC0R3

Amount of Each Receipt this Period
200.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation
Telecard Network LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCY2Q82

Amount of Each Receipt this Period
2600.00

* In-Kind: Goods and Services

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 63 OF 110
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Jhonny Urena

Mailing Address 8567 188th St

City Hollis State NY Zip Code 11423-1162

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

Name of Employer CEO Occupation Compare

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSW41

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Jaime Vargas

Mailing Address 1286 Saint Nicholas Ave

City New York State NY Zip Code 10033-7264

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : VNJ3JCRB047

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1286 Saint Nicholas Ave

City New York State NY Zip Code 10033-7264

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : VNJ3JCTDH62

Amount of Each Receipt this Period
 1600.00

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial)
Alfredo Vidal

Mailing Address 6 Danbury Ct

City Albany State NY Zip Code 12205-3611

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

Name of Employer The Vidal Group, LLC Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCSSAS9

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Kevin Wang

Mailing Address 32 Broadway

City New York State NY Zip Code 10004-1609

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

Name of Employer Noviant Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 23 / 2014

Transaction ID : VNJ3JCRKDK8

Amount of Each Receipt this Period
 250.00

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

Mailing Address 26 Woodmont Dr

City Delmar State NY Zip Code 12054-3811

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

Name of Employer Brown & Weinraub Occupation Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : VNJ3JCR5W34

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 110
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Neil J Weissman

Mailing Address 1365 York Ave
10E

City State Zip Code
New York NY 10021-4035

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

Name of Employer Occupation
M&B Capital Ltd. Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2014

Transaction ID : VNJ3JCTCTT0

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joseph Wiscovitch

Mailing Address 227 E 57th St

City State Zip Code
New York NY 10022-2828

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

Name of Employer Occupation
Wiscovitch Associates, Ltd. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : VNJ3JCRB5V0

Amount of Each Receipt this Period
1000.00

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

Mailing Address 55 Taunton Lake Rd

City State Zip Code
Newtown CT 06470-1413

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

Name of Employer Occupation
Self Restauranteur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : VNJ3JCST8X4

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 110	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

A. Full Name (Last, First, Middle Initial)
Michel Zaleski

Mailing Address

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Self Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : VNJ3JCR5WV3

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Kathleen Zamechansky

Mailing Address 1200 Waters Pl
Ste M114

City State Zip Code
Bronx NY 10461-2736

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

Name of Employer Occupation
KZA Realty Group, Inc. President/Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : VNJ3JCRZBH2

Amount of Each Receipt this Period
250.00

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

Mailing Address 123 Duffy Dr

City State Zip Code
Allendale NJ 07401-1424

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

Name of Employer Occupation
Lemle & Wolff Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 21 / 2014

Transaction ID : VNJ3JCRDJJ3

Amount of Each Receipt this Period
400.00

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

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

3250.00

176694.65

**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 67 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. 809 Bar and Grill		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 305.54
City	State Zip Code	
Purpose of Disbursement Meals	Category/ Type 001	Transaction ID : VNH4A9SQVY3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 2923.88
City	State Zip Code Augusta GA 30909-9373	
Purpose of Disbursement Wage Tax	Category/ Type 001	Transaction ID : VNH4A9SQ3E6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 63.56
City	State Zip Code Augusta GA 30909-9373	
Purpose of Disbursement Insurance	Category/ Type 001	Transaction ID : VNH4A9SQ3G2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3292.98
TOTAL This Period (last page this line number only).....	

**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 68 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espallat for Congress

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 98.15
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Services Rendered	Transaction ID : VNH4A9SR4K5
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 100.45
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Services Rendered	Transaction ID : VNH4A9SQ2R3
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 2783.31
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Wage Tax	Transaction ID : VNH4A9SQ2S0
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2981.91
TOTAL This Period (last page this line number only).....	

**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 69 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 62.81
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Insurance	Transaction ID : VNH4A9SQ2T8
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 100.45
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Services Rendered	Transaction ID : VNH4A9SQNE4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 62.06
City Augusta	State GA	
Zip Code 30909-9373	Purpose of Disbursement Insurance	Transaction ID : VNH4A9SQP06
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	225.32
TOTAL This Period (last page this line number only).....	

**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 70 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 2824.25
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Wage Tax	Category/Type 001	Transaction ID : VNH4A9SQP14
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 5600.06
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Wages	Category/Type 001	Transaction ID : VNH4A9SQWV2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 98.15
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Services Rendered	Category/Type 001	Transaction ID : VNH4A9SQXG8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8522.46
TOTAL This Period (last page this line number only).....	

**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 71 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 77.45
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Insurance	Category/Type 001	Transaction ID : VNH4A9SQNY0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 3458.94
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Wage Tax	Category/Type 001	Transaction ID : VNH4A9SQP30
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 6614.65
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Wages	Category/Type 001	Transaction ID : VNH4A9SQXX1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10151.04
TOTAL This Period (last page this line number only).....	

**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 72 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. ADP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1 Adp Dr Ms 600		Amount of Each Disbursement this Period 102.74
City Augusta	State GA Zip Code 30909-9373	
Purpose of Disbursement Services Rendered	001	Transaction ID : VNH4A9SQNW4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Apple Store		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1981 Broadway		Amount of Each Disbursement this Period 2216.58
City New York	State NY Zip Code 10023-5801	
Purpose of Disbursement Supplies	001	Transaction ID : VNH4A9SQX35
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bankcard Merchant USA		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 28720 Roadside Dr		Amount of Each Disbursement this Period 409.81
City Agoura	State CA Zip Code 91301-4572	
Purpose of Disbursement Merchant Bank Fees	001	Transaction ID : VNH4A9SQNG0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2729.13
TOTAL This Period (last page this line number only).....	

**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 73 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Bankcard Merchant USA		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 28720 Roadside Dr		Amount of Each Disbursement this Period 577.84
City Agoura	State CA Zip Code 91301-4572	
Purpose of Disbursement Merchant Bank Fees	Category/Type 001	Transaction ID : VNH4A9SR4M3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dennie Beach		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1760 2nd Ave Apt 22C		Amount of Each Disbursement this Period 250.00
City New York	State NY Zip Code 10128-5396	
Purpose of Disbursement Two laptop computers	Category/Type	Transaction ID : VNJ3JCR5WG6I
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) c. Bedford Grove LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 349 5th Ave		Amount of Each Disbursement this Period 5000.00
City New York	State NY Zip Code 10016-5019	
Purpose of Disbursement Consultant	Category/Type 001	Transaction ID : VNH4A9SKT88
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5827.84
TOTAL This Period (last page this line number only).....	

**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 74 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Bedford Grove LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 349 5th Ave		Amount of Each Disbursement this Period 5298.82 Transaction ID : VNH4A9SQWJ1
City New York State NY Zip Code 10016-5019	Purpose of Disbursement Fundraiser Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ben Franklin Reform Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 304 W 231st St		Amount of Each Disbursement this Period 225.00 Transaction ID : VNH4A9SJWR9
City Bronx State NY Zip Code 10463-3805	Purpose of Disbursement Journal Ad Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Ben Franklin Reform Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 304 W 231st St		Amount of Each Disbursement this Period 750.00 Transaction ID : VNH4A9SQM78
City Bronx State NY Zip Code 10463-3805	Purpose of Disbursement Full Page Ad Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	6273.82
TOTAL This Period (last page this line number only).....	

**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 75 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. BP Fuel		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 4353 Broadway		Amount of Each Disbursement this Period 2014 163.33
City New York	State NY	
Zip Code 10033-2410	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQ1M2
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BP Fuel		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 4353 Broadway		Amount of Each Disbursement this Period 2014 127.99
City New York	State NY	
Zip Code 10033-2410	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQ1W5
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jesse S Campoamor		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 355 8th Ave		Amount of Each Disbursement this Period 2014 2462.07
City New York	State NY	
Zip Code 10001-4838	Purpose of Disbursement Wages	Transaction ID : VNH4A9SQ3J8
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2753.39
TOTAL This Period (last page this line number only).....	

**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 76 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Jesse S Campoamor		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 355 8th Ave		Amount of Each Disbursement this Period 2462.06 Transaction ID : VNH4A9SQ2V6
City New York	State NY	
Zip Code 10001-4838	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Norma Campusano		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 401.28 Transaction ID : VNH4A9SQY12
City	State	
Zip Code	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Victor Capellan		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 32 Parkside Drive		Amount of Each Disbursement this Period 390.00 Transaction ID : VNJ3JCTCR011
City Cranston	State RI	
Zip Code 02905-1330	Purpose of Disbursement Venue and tickets	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

SUBTOTAL of Disbursements This Page (optional).....	3253.34
TOTAL This Period (last page this line number only).....	

**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 77 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Caridad Restaurant		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 135 W Kingsbridge Rd		Amount of Each Disbursement this Period 288.38
City Bronx	State NY	
Zip Code 10468-3908	Purpose of Disbursement Meals	Transaction ID : VNH4A9SQY52
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Caroline Apartments		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 1500.00
City	State	
Zip Code	Purpose of Disbursement Rent	Transaction ID : VNH4A9SQMT6
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Miguel Cruz Tejada		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 530 W 174th St Apt 32		Amount of Each Disbursement this Period 1000.00
City New York	State NY	
Zip Code 10033-8760	Purpose of Disbursement Press Release	Transaction ID : VNH4A9SQMH7
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2788.38
TOTAL This Period (last page this line number only).....	

**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 78 OF 110			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Espallat for Congress

Full Name (Last, First, Middle Initial) A. Deluxe Business Systems		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 273.27
City	State Zip Code	
Purpose of Disbursement Supplies	Candidate Name	Transaction ID : VNH4A9SQWA8
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Democratic Club of El Barrio		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1695 Madison Ave		Amount of Each Disbursement this Period 800.00
City	State Zip Code	
New York NY 10029-1819		Transaction ID : VNH4A9SG570
Purpose of Disbursement Petitions	Candidate Name	
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Petition workers
State: District:		

Full Name (Last, First, Middle Initial) C. Democratic Club of El Barrio		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 1695 Madison Ave		Amount of Each Disbursement this Period 690.00
City	State Zip Code	
New York NY 10029-1819		Transaction ID : VNH4A9SKTB2
Purpose of Disbursement Petitions	Candidate Name	
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1763.27
TOTAL This Period (last page this line number only).....	

**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 79 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Democratic Club of El Barrio		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1695 Madison Ave		Amount of Each Disbursement this Period 840.00 Transaction ID : VNH4A9SPYK8
City New York	State NY	
Zip Code 10029-1819	Purpose of Disbursement Canvasser	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Democratic Club of El Barrio		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1695 Madison Ave		Amount of Each Disbursement this Period 2436.00 Transaction ID : VNH4A9SQM02
City New York	State NY	
Zip Code 10029-1819	Purpose of Disbursement Canvasser	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Democratic Club of El Barrio		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1695 Madison Ave		Amount of Each Disbursement this Period 2282.00 Transaction ID : VNH4A9SQXZ6
City New York	State NY	
Zip Code 10029-1819	Purpose of Disbursement Canvasser	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5558.00
TOTAL This Period (last page this line number only).....	

**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 80 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial)
A. Direct Distributors

Mailing Address 1169 226th Dr
1E

City Bronx State NY Zip Code 10466-5523

Purpose of Disbursement Literature Drop

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 23 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : VNH4A9SQMN8

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Yokarina Duarte

Mailing Address 548 W 164th St
4D

City New York State NY Zip Code 10032-4927

Purpose of Disbursement Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 25 / 2014

Amount of Each Disbursement this Period: 497.16

Transaction ID : VNH4A9SQ363

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. El Viejo Jobo

Mailing Address 231 Sherman Ave

City New York State NY Zip Code 10034-2502

Purpose of Disbursement Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 08 / 2014

Amount of Each Disbursement this Period: 236.22

Transaction ID : VNH4A9SQWT4

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 1733.38

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

**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 81 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Es La Reina de C High		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address		Amount of Each Disbursement this Period 266.73
City	State Zip Code	
Purpose of Disbursement Meals	Candidate Name	Transaction ID : VNH4A9SQW17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dyckman Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 101 Dyckman St		Amount of Each Disbursement this Period 773.38
City	State Zip Code New York NY 10040-1002	
Purpose of Disbursement Meals	Candidate Name	Transaction ID : VNH4A9SQWG5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Rappin Fireman		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 5000.00
City	State Zip Code	
Purpose of Disbursement Consultant	Candidate Name	Transaction ID : VNH4A9SG4R2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6040.11
TOTAL This Period (last page this line number only).....	

**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 82 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Rappin Fireman		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH4A9SG7Z4
City	State Zip Code	
Purpose of Disbursement Consultant	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Rappin Fireman		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH4A9SQW74
City	State Zip Code	
Purpose of Disbursement Consultant	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Rappin Fireman		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNH4A9SQKX9
City	State Zip Code	
Purpose of Disbursement Consultant	001 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

**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 83 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Rappin Fireman		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address		Amount of Each Disbursement this Period 2000.00
City	State Zip Code	
Purpose of Disbursement Consultant	Candidate Name	Transaction ID : VNH4A9SQXY9
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Friends of Robert J. Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address		Amount of Each Disbursement this Period 4100.00
City	State Zip Code	
Purpose of Disbursement Consultant	Candidate Name	Transaction ID : VNH4A9SQZA4
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. George Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address		Amount of Each Disbursement this Period 4000.00
City	State Zip Code	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : VNH4A9SQKT5
Category/Type 002		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Van Purchase
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10100.00
TOTAL This Period (last page this line number only).....	

**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 84 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Glaction LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 818 Topsail Ln		Amount of Each Disbursement this Period 2000.00
City Secaucus	State NJ	
Zip Code 07094-2236	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SG616
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Congressional Campaign 2012 Balance
State: District:		

Full Name (Last, First, Middle Initial) B. Guerrero Flower Shop		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 4419 Broadway		Amount of Each Disbursement this Period 86.60
City New York	State NY	
Zip Code 10040-4009	Purpose of Disbursement Fundraiser	Transaction ID : VNH4A9SQX19
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carlos Gutierrez De La Vega		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State	
Zip Code	Purpose of Disbursement Bx Endorsement	Transaction ID : VNH4A9SG7X8
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3086.60
TOTAL This Period (last page this line number only).....	

**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 85 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement MM / DD / YYYY 05 / 19 / 2014
Mailing Address 401 W 207th St		Amount of Each Disbursement this Period 343.99
City New York	State NY	
Zip Code 10034-3699	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQXR1
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 401 W 207th St		Amount of Each Disbursement this Period 47.63
City New York	State NY	
Zip Code 10034-3699	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQZ88
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Imagine Auto Parts		Date of Disbursement MM / DD / YYYY 05 / 16 / 2014
Mailing Address 830 Saint Anns Ave		Amount of Each Disbursement this Period 730.55
City Bronx	State NY	
Zip Code 10456-7612	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQNC8
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1122.17
TOTAL This Period (last page this line number only).....	

**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 86 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Maximo Javier		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 5975 Shore Pkwy Apt 3F		Amount of Each Disbursement this Period 1031.07
City Brooklyn	State NY	
Zip Code 11236-5732	Purpose of Disbursement Wages	Transaction ID : VNH4A9SQ3M4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Maximo Javier		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 5975 Shore Pkwy Apt 3F		Amount of Each Disbursement this Period 561.72
City Brooklyn	State NY	
Zip Code 11236-5732	Purpose of Disbursement Wages	Transaction ID : VNH4A9SQ371
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. JetBlue Airlines		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address		Amount of Each Disbursement this Period 594.10
City	State	
Zip Code	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQY60
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2186.89
TOTAL This Period (last page this line number only).....	

**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 87 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. L. D. Bland & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 208 W 151st St		Amount of Each Disbursement this Period 9,000.00
City New York	State NY	
Zip Code 10039-4601	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SG768
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Lin. DC13SAE 2014-01/Petitions
State: District:		

Full Name (Last, First, Middle Initial) B. L. D. Bland & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 208 W 151st St		Amount of Each Disbursement this Period 4,000.00
City New York	State NY	
Zip Code 10039-4601	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SJWQ1
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. L. D. Bland & Associates, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 208 W 151st St		Amount of Each Disbursement this Period 4,000.00
City New York	State NY	
Zip Code 10039-4601	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SQKZ4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

**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 88 OF 110			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Marc A. Landis		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 337 W 85th St Apt 1B		Amount of Each Disbursement this Period 343.65
City New York State NY Zip Code 10024-3858	Purpose of Disbursement Food & Bev	Transaction ID : VNJ3JCS8Y671
Candidate Name	Category/Type	* In-Kind Received
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Pedro Lopez		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 400.00
City State Zip Code	Purpose of Disbursement Postering	Transaction ID : VNH4A9SQMM0
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Raquel Mejia		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 562 W 189th St Apt 32		Amount of Each Disbursement this Period 693.75
City New York State NY Zip Code 10040-4364	Purpose of Disbursement Wages	Transaction ID : VNH4A9SQ3N2
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1437.40
TOTAL This Period (last page this line number only).....	

**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 89 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Raquel Mejia		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 562 W 189th St Apt 32		Amount of Each Disbursement this Period 693.74
City New York	State NY	
Zip Code 10040-4364	Purpose of Disbursement Wages	Transaction ID : VNH4A9SQ389
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Metro Strategies		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 10446.00
City New York	State NY	
Zip Code 10034-1666	Purpose of Disbursement Invoices 600,601,602	Transaction ID : VNH4A9SG5M3
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Posters, Palmcards
State: District:		

Full Name (Last, First, Middle Initial) c. Metro Strategies		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 22782.33
City New York	State NY	
Zip Code 10034-1666	Purpose of Disbursement Mailing	Transaction ID : VNH4A9SQM44
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	33922.07
TOTAL This Period (last page this line number only).....	

**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 90 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Metro Westside Wireless		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 595 W 207th St		Amount of Each Disbursement this Period 498.42
City New York	State NY	
Zip Code 10034-2605	Purpose of Disbursement Cellular Service	Transaction ID : VNH4A9SQ1V7
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Metro Westside Wireless		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 595 W 207th St		Amount of Each Disbursement this Period 700.65
City New York	State NY	
Zip Code 10034-2605	Purpose of Disbursement Cellular Service	Transaction ID : VNH4A9SQP55
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mirram Group LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 7500.00
City New York	State NY	
Zip Code 10034-1666	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SG5Q7
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Inv. 5227
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8699.07
TOTAL This Period (last page this line number only).....	

**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 91 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Mirram Group LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 15000.00
City New York State NY Zip Code 10034-1666	Purpose of Disbursement Consultant	
Candidate Name	Category/Type 001	Transaction ID : VNH4A9SQTV8
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mirram Group LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 7500.00
City New York State NY Zip Code 10034-1666	Purpose of Disbursement Consultant	
Candidate Name	Category/Type 001	Transaction ID : VNH4A9SQM60
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mirram Group LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 5030 Broadway Ste 807		Amount of Each Disbursement this Period 7500.00
City New York State NY Zip Code 10034-1666	Purpose of Disbursement Consultant	
Candidate Name	Category/Type 001	Transaction ID : VNH4A9SQZE6
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	30000.00
TOTAL This Period (last page this line number only)	

**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 92 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 207th Street		Amount of Each Disbursement this Period 226.00
City New York	State NY	
Zip Code 10034	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQ1Q6
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 207th Street		Amount of Each Disbursement this Period 238.00
City New York	State NY	
Zip Code 10034	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQNV6
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MTA NYC Transit		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 207th Street		Amount of Each Disbursement this Period 226.00
City New York	State NY	
Zip Code 10034	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQZ63
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

**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 93 OF 110		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Nagle Fuel		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 265 Nagle Ave		Amount of Each Disbursement this Period 496.75
City New York	State NY	
Zip Code 10034-3573	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQTX4
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nagle Fuel		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 265 Nagle Ave		Amount of Each Disbursement this Period 652.79
City New York	State NY	
Zip Code 10034-3573	Purpose of Disbursement Travel	Transaction ID : VNH4A9SQNB0
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NGP Van Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1101 15th St NW		Amount of Each Disbursement this Period 1524.50
City Washington	State DC	
Zip Code 20005-5002	Purpose of Disbursement Bank Service Charges	Transaction ID : VNH4A9SQTW6
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2674.04
TOTAL This Period (last page this line number only).....	

**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 94 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Northern Manhattan Democrats		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address		Amount of Each Disbursement this Period 1600.00 Transaction ID : VNH4A9SJWB7
City	State Zip Code	
Purpose of Disbursement Rent	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Northern Manhattan Democrats		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 1600.00 Transaction ID : VNH4A9SQMQ4
City	State Zip Code	
Purpose of Disbursement Rent	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NY Prints LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1105 44th Dr		Amount of Each Disbursement this Period 326.63 Transaction ID : VNH4A9SQVK6
City	State Zip Code	
Long Island City	NY 11101-5107	
Purpose of Disbursement Petitions	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3526.63
TOTAL This Period (last page this line number only).....	

**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 95 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. NYS DMV		Date of Disbursement MM / DD / YYYY 05 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 438.25
City	State Zip Code	
Purpose of Disbursement Travel	Category/Type 002	Transaction ID : VNH4A9SQXN7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Petty Cash		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement Petty Cash	Category/Type 001	Transaction ID : VNH4A9SG6M6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Petty Cash		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement Petty Cash	Category/Type 001	Transaction ID : VNH4A9SG7W0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	938.25
TOTAL This Period (last page this line number only).....	

**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 96 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Petty Cash		M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address		Amount of Each Disbursement this Period 250.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SKT62
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Petty Cash		M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address		Amount of Each Disbursement this Period 250.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SQKB6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Petty Cash		M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address		Amount of Each Disbursement this Period 255.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SQKW1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	755.00
TOTAL This Period (last page this line number only).....	

**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 97 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Petty Cash		M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 255.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SQM52
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Petty Cash		M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 505.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SQM93
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Petty Cash		M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 255.00
City State Zip Code		
Purpose of Disbursement Petty Cash	001	Transaction ID : VNH4A9SQN11
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1015.00
TOTAL This Period (last page this line number only).....	

**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 98 OF 110			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial)

A. Petty Cash

Mailing Address

City State Zip Code

Purpose of Disbursement
Petty Cash

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
06 / 03 / 2014

Amount of Each Disbursement this Period
250.00

Transaction ID : VNH4A9SQZB2

Category/Type
001

Full Name (Last, First, Middle Initial)

B. Marcello Puello

Mailing Address 560 W 184th St
Rm 702

City State Zip Code
New York NY 10033-4130

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 24 / 2014

Amount of Each Disbursement this Period
100.00

Transaction ID : VNH4A9SKSR2

Category/Type
001

Full Name (Last, First, Middle Initial)

C. Marcello Puello

Mailing Address 560 W 184th St
Rm 702

City State Zip Code
New York NY 10033-4130

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
05 / 07 / 2014

Amount of Each Disbursement this Period
100.00

Transaction ID : VNH4A9SQKD2

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 450.00

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

**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 99 OF 110		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Marcello Puello		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 560 W 184th St Rm 702		Amount of Each Disbursement this Period 100.00 Transaction ID : VNH4A9SQMA1
City New York	State NY	
Purpose of Disbursement Wages	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Marcello Puello		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 560 W 184th St Rm 702		Amount of Each Disbursement this Period 56.00 Transaction ID : VNH4A9SQMY7
City New York	State NY	
Purpose of Disbursement Reimbursement	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. RA Enterprises		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH4A9SR057
City	State	
Purpose of Disbursement Rent	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1156.00
TOTAL This Period (last page this line number only).....	

**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 100 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Red Horse Strategies		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 55 Washington St Ste 624		Amount of Each Disbursement this Period 5000.00
City Brooklyn	State NY	
Zip Code 11201-1062	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SJWM8
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Red Horse Strategies		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 55 Washington St Ste 624		Amount of Each Disbursement this Period 21000.00
City Brooklyn	State NY	
Zip Code 11201-1062	Purpose of Disbursement Canvasser	Transaction ID : VNH4A9SQM36
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Red Horse Strategies		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 55 Washington St Ste 624		Amount of Each Disbursement this Period 5000.00
City Brooklyn	State NY	
Zip Code 11201-1062	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SQZD8
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	31000.00
TOTAL This Period (last page this line number only).....	

**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 101 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Repertorio Espanol			Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 138 E 27th St			Amount of Each Disbursement this Period 1435.00
City New York	State NY	Zip Code 10016-9001	
Purpose of Disbursement Fundraiser		Candidate Name	Transaction ID : VNH4A9SG6H2
Category/Type 007			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		3/16 Event
State: District:			

Full Name (Last, First, Middle Initial) B. Jon Reznick			Date of Disbursement MM / DD / YYYY 05 / 13 / 2014
Mailing Address 1911 Willow Creek Dr 202			Amount of Each Disbursement this Period 1250.00
City Austin	State TX	Zip Code 78741-4466	
Purpose of Disbursement Consultant		Candidate Name	Transaction ID : VNH4A9SQM86
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Digital Consulting
State: District:			

Full Name (Last, First, Middle Initial) C. JONATHAN REZNICK			Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 1911 Willow Creek Dr Apt 202			Amount of Each Disbursement this Period 1250.00
City Austin	State TX	Zip Code 78741-4425	
Purpose of Disbursement Website (March)		Candidate Name	Transaction ID : VNH4A9SG7F7
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3935.00
TOTAL This Period (last page this line number only).....	

**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 102 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. John Ruiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 220.00 Transaction ID : VNH4A9SQMV4
City	State Zip Code	
Purpose of Disbursement Food & Bev for volunteers for EH Field Day	Category/ Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Saint Spyridon Greek Orthodox Church		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address		Amount of Each Disbursement this Period 300.00 Transaction ID : VNH4A9SJWJ2
City	State Zip Code	
Purpose of Disbursement Volunteer Event	Category/ Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stanley Schlein Esq.		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 481 King Ave		Amount of Each Disbursement this Period 5000.00 Transaction ID : VNH4A9SPYP2
City	State Zip Code Bronx NY 10464-1228	
Purpose of Disbursement Consultant	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5520.00
TOTAL This Period (last page this line number only).....	

**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 103 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 4320 Broadway		Amount of Each Disbursement this Period 588.19 Transaction ID : VNH4A9SQ2N9
City New York	State NY	
Zip Code 10033-2412	Purpose of Disbursement Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 05 / 21 / 2014
Mailing Address 4320 Broadway		Amount of Each Disbursement this Period 723.83 Transaction ID : VNH4A9SQXT7
City New York	State NY	
Zip Code 10033-2412	Purpose of Disbursement Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address 4320 Broadway		Amount of Each Disbursement this Period 301.49 Transaction ID : VNH4A9SQY86
City New York	State NY	
Zip Code 10033-2412	Purpose of Disbursement Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1613.51
TOTAL This Period (last page this line number only).....	

**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 104 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Stoll Glickman & Bellina LLP		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 475 Atlantic Ave		Amount of Each Disbursement this Period 4177.10
City Brooklyn	State NY	
Zip Code 11217-1812	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SG7T4
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Ballot challenge 2012
State: District:		

Full Name (Last, First, Middle Initial) B. Stoll Glickman & Bellina LLP		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 475 Atlantic Ave		Amount of Each Disbursement this Period 6900.00
City Brooklyn	State NY	
Zip Code 11217-1812	Purpose of Disbursement Consultant	Transaction ID : VNH4A9SQWE9
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address		Amount of Each Disbursement this Period 147.66
City Bronx	State NY	
Zip Code 10451	Purpose of Disbursement Supplies	Transaction ID : VNH4A9SQ2P7
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11224.76
TOTAL This Period (last page this line number only).....	

**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 105 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 152.54
City Bronx	State NY	
Zip Code 10451	Purpose of Disbursement Supplies	Transaction ID : VNH4A9SQXK2
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 4161 Kissena Blvd		Amount of Each Disbursement this Period 456.12
City Flushing	State NY	
Zip Code 11355-3181	Purpose of Disbursement Cable/Internet	Transaction ID : VNH4A9SG7R8
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 4161 Kissena Blvd		Amount of Each Disbursement this Period 457.31
City Flushing	State NY	
Zip Code 11355-3181	Purpose of Disbursement Cable/Internet	Transaction ID : VNH4A9SQM28
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1065.97
TOTAL This Period (last page this line number only).....	

**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 106 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Armin Torres		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address		Amount of Each Disbursement this Period 2600.00
City	State Zip Code	
Purpose of Disbursement Goods and Services	Candidate Name	Transaction ID : VNJ3JCY2Q821
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	* In-Kind Received

Full Name (Last, First, Middle Initial) B. Christopher Torres		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address 150 Grove St Apt 1		Amount of Each Disbursement this Period 1536.89
City	State Zip Code	
Purpose of Disbursement Wages	Candidate Name	Transaction ID : VNH4A9SQ3W7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Christopher Torres		Date of Disbursement MM / DD / YYYY 04 / 25 / 2014
Mailing Address 150 Grove St Apt 1		Amount of Each Disbursement this Period 1536.90
City	State Zip Code	
Purpose of Disbursement Wages	Candidate Name	Transaction ID : VNH4A9SQ3A5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	5673.79
TOTAL This Period (last page this line number only).....	

**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 107 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. United Christian Evangelistic Association		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 4140 Broadway		Amount of Each Disbursement this Period 500.00
City New York State NY Zip Code 10033-3701	Purpose of Disbursement Press Conference	001 Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH4A9SG7Y6

Full Name (Last, First, Middle Initial) B. Utica National		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address		Amount of Each Disbursement this Period 2558.00
City State Zip Code	Purpose of Disbursement Insurance	002 Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH4A9SQKV3
		Van Insurance

Full Name (Last, First, Middle Initial) c. Valentine Avenue Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 245.00
City State Zip Code	Purpose of Disbursement Supplies	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Transaction ID : VNH4A9SQYX1

SUBTOTAL of Disbursements This Page (optional).....	3303.00
TOTAL This Period (last page this line number only).....	

**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 108 OF 110			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 154.48
City	State Zip Code	
Purpose of Disbursement Cellular Service	001	Transaction ID : VNH4A9SQWP3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address		Amount of Each Disbursement this Period 191.48
City	State Zip Code	
Purpose of Disbursement Cellular Service	001	Transaction ID : VNH4A9SQP48
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address		Amount of Each Disbursement this Period 205.04
City	State Zip Code	
Purpose of Disbursement Cellular Service	001	Transaction ID : VNH4A9SQZ21
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	551.00
TOTAL This Period (last page this line number only).....	

**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 109 OF 110	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espailat for Congress

Full Name (Last, First, Middle Initial) A. WN Signs Shop LLC		Date of Disbursement MM / DD / YYYY 05 / 09 / 2014
Mailing Address		Amount of Each Disbursement this Period 900.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : VNH4A9SQM10
Category/Type 006		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	245440.52

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Espailat for Congress

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

Mirram Group LLC

Nature of Debt (Purpose):
Survey/Ad

Mailing Address 5030 Broadway
Ste 807

City State Zip Code
New York NY 10034-1666

Outstanding Balance Beginning This Period

0.00

Transaction ID : VNF5T9H9M56

Amount Incurred This Period

22823.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

22823.23

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

22823.23

22823.23

0.00

22823.23