

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

CTC Action

ADDRESS (number and street) 123 Seventh Avenue
#168
 Check if different than previously reported. (ACC) Brooklyn NY 11215

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00661264

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 27 / 2018 through 12 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Thomases, Ben, , ,

Type or Print Name of Treasurer

Signature of Treasurer Thomases, Ben, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CTC Action

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text"/>	<input type="text" value="1278.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="49279.24"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8020.59"/>	<input type="text" value="122805.64"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="57299.83"/>	<input type="text" value="124084.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29041.39"/>	<input type="text" value="95825.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="28258.44"/>	<input type="text" value="28258.44"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CTC Action

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7496.55	101692.97
(ii) Unitemized	524.04	11612.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8020.59	113305.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8900.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8020.59	122205.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	600.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8020.59	122805.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8020.59	122805.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2746.84	13378.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2746.84	13378.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	26294.55	82446.88
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29041.39	95825.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29041.39	95825.60

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8020.59	122205.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8020.59	122205.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2746.84	13378.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2746.84	13378.72

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
CTC Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bieker, Gloria, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address 2 black walnut rd			Transaction ID : SA11AI.4771
City Scarsdale	State NY	Zip Code 10583	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Psychotherapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Epstein, Rachel, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address 1 Grace Ct			Transaction ID : SA11AI.4751
City Brooklyn	State NY	Zip Code 11201	Amount of Each Receipt this Period 103.50
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 303.50	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fleishman, Ellen, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2018
Mailing Address 401 8th Ave. 65			Transaction ID : SA11AI.4766
City Bklyn	State NY	Zip Code 11215	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired		Occupation (for Individual) Supervisor of psychologists	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	603.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CTC Action

A. Goroff, Nancy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 NIGHT HERON DR

City Stony Brook	State NY	Zip Code 11790
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State University of New York	Occupation (for Individual) Chemistry Professor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period
1000.00

Memo Item

B. Kipnis, Patricia, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1121 Cotswold Lane

City Cherry Hill	State NJ	Zip Code 08034
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bailey & Glasser LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period
500.00

Memo Item

C. Smolenski, Carol, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 563 8th St., Apt. 2R

City Brooklyn	State NY	Zip Code 11215
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
208.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Transaction ID : SA11AI.4762

Amount of Each Receipt this Period
103.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1603.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CTC Action

A. Trey, Jessica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 HANSON PL, APT 27A

City Brooklyn	State NY	Zip Code 11243
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Hannah Senesh School	Occupation (for Individual) Teacher
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
289.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
186.05

Memo Item

B. TURNER, Sandra, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 Amity Street

City Brooklyn	State NY	Zip Code 11201
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
621.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

Transaction ID : SA11AI.4772

Amount of Each Receipt this Period
103.50

Memo Item

C. Weiner, Miriam, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 287-20th St

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Vineyard Theatre	Occupation (for Individual) Literary Manager
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5020.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2018

Transaction ID : SA11AI.4750

Amount of Each Receipt this Period
5000.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	5289.55
TOTAL This Period (last page this line number only).....	7496.55

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CTC Action

A. Barbanel-Fried, Adam, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 123 Seventh Avenue #168

City Brooklyn State NY Zip Code 11215

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4744

Amount of Each Disbursement this Period: 1103.83

Memo Item

B. Squarespace

Full Name (Last, First, Middle Initial)

Mailing Address 225 Varick St

City New York State NY Zip Code 10014

Purpose of Disbursement Office usage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4744.1

Amount of Each Disbursement this Period: 312.00

Memo Item

C. Verizon Wireless

Full Name (Last, First, Middle Initial)

Mailing Address 1095 Avenue of the Americas

City New York State NY Zip Code 10036

Purpose of Disbursement Telecommunications

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4744.

Amount of Each Disbursement this Period: 246.44

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1103.83

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CTC Action

A. Verizon Wireless

Full Name (Last, First, Middle Initial)

Mailing Address 1095 Avenue of the Americas

City New York State NY Zip Code 10036

Purpose of Disbursement Telecommunications

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4744.:

Amount of Each Disbursement this Period: 219.79

Memo Item

B. Community Labor Administrative Services, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address One Metrotech Center North 11th Fl

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement Compliance services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4740

Amount of Each Disbursement this Period: 1150.00

Memo Item

C. New Springville Jewish Center

Full Name (Last, First, Middle Initial)

Mailing Address 120 Saxon Ave

City Staten Island State NY Zip Code 10314

Purpose of Disbursement Room Rental

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4735

Amount of Each Disbursement this Period: 400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1550.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CTC Action

A. Stripe

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry Street
Suite 550

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y
12 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4780

Amount of Each Disbursement this Period: 93.01

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	93.01
TOTAL This Period (last page this line number only).....▶	2746.84

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CTC Action

Full Name (Last, First, Middle Initial) A. CUNY College of Staten Island		Date of Disbursement MM / DD / YYYY 12 / 06 / 2018
Mailing Address 2800 Victory Blvd		FEC Identification Number C [] Transaction ID : SB29.4801 Amount of Each Disbursement this Period [] 825.00
City Staten Island	State NY	Zip Code 10314
Purpose of Disbursement Space rental	Category/Type 002	
Candidate Name Rose, Max, , ,	Disbursement For: 2018	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 11	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TruCorps llc		Date of Disbursement MM / DD / YYYY 12 / 10 / 2018
Mailing Address 228 Park Avenue South		FEC Identification Number C [] Transaction ID : SB29.4802 Amount of Each Disbursement this Period [] 25469.55
City New York	State NY	Zip Code 10003
Purpose of Disbursement Personnel	Category/Type 001	
Candidate Name Rose, Max, , ,	Disbursement For: 2018	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 11	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement	Category/Type []	
Candidate Name	Disbursement For:	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional)..... ▶	[] 26294.55
TOTAL This Period (last page this line number only)..... ▶	[] 26294.55