

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
GREEN PARTY OF NEW YORK STATE

ADDRESS (number and street) 7988 Van Amburg Road
 Check if different than previously reported. (ACC)
Hammondsport NY 14840

2. **FEC IDENTIFICATION NUMBER** C00318907
3. IS THIS REPORT **NEW (N)** **OR** **AMENDED (A)**

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

5. Covering Period 07 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Rachel Treichler
Signature of Treasurer Electronically Filed by Rachel Treichler Date 02 03 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GREEN PARTY OF NEW YORK STATE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		504.83
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	8066.50									
(c) Total Receipts (from Line 19)	7468.73	16875.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15535.23	17380.70								
7. Total Disbursements (from Line 31)	5722.61	7568.08								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9812.62	9812.62								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	3800.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
GREEN PARTY OF NEW YORK STATE

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)	707.02	4701.24
(ii) Unitemized	2679.04	5152.43
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3386.06	9853.67
(b) Political Party Committees	283.20	283.20
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3669.26	10136.87
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.)	3799.47	6739.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7468.73	16875.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7468.73	16875.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5722.61	7568.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5722.61	7568.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5722.61	7568.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5722.61	7568.08

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	3669.26	10136.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3669.26	10136.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5722.61	7568.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5722.61	7568.08

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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

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)
GREEN PARTY OF NEW YORK STATE

A.

Full Name (Last, First, Middle Initial)
DEYVA ARTHUR

Mailing Address 259 6TH AVE

City State Zip Code
Troy NY 12182

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

Name of Employer Occupation
Photographer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.15

Date of Receipt
MM / DD / YYYY
09 / 23 / 2009

Transaction ID: SA11AI.5239

Amount of Each Receipt this Period
82.02

B.

Full Name (Last, First, Middle Initial)
Mr. Michael D Emperor

Mailing Address 340 88 Street

City State Zip Code
Brooklyn NY 11209

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

Name of Employer Occupation
Bob Altavilla Interiors Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2009

Transaction ID: SA11AI.5235

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael D Emperor

Mailing Address 340 88 Street

City State Zip Code
Brooklyn NY 11209

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

Name of Employer Occupation
Bob Altavilla Interiors Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2009

Transaction ID: SA11AI.5249

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **132.02**

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

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

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

FOR LINE NUMBER: PAGE 7 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
Mr. Craig T Taylor

Mailing Address 10920 Tinkham Road

City State Zip Code
Darien Center NY 14040

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

Name of Employer Self Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	0	9

Transaction ID: SA11AI.5252

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mr. Craig T Taylor

Mailing Address 10920 Tinkham Road

City State Zip Code
Darien Center NY 14040

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

Name of Employer Self Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	9

Transaction ID: SA11AI.5271

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Contributions Unitemized

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
790.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	9	/	2	0	0	9

Transaction ID: SA11AI.5225

Amount of Each Receipt this Period
355.00

SUBTOTAL of Receipts This Page (optional) ► **395.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A.

Full Name (Last, First, Middle Initial)
Contributions Unitemized

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
970.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5240

Amount of Each Receipt this Period
180.00

SUBTOTAL of Receipts This Page (optional)	▶	180.00
TOTAL This Period (last page this line number only)	▶	707.02

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

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

FOR LINE NUMBER: PAGE 9 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
GREEN PARTY OF THE UNITED STATES
 Mailing Address P.O. Box 18452
 City State Zip Code
 Washington DC 20036
 Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2009
Transaction ID: SA11B.5412
 Amount of Each Receipt this Period
 261.60
 FEC ID number of contributing federal political committee. **C** C00370221
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 261.60

B. Full Name (Last, First, Middle Initial)
GREEN PARTY OF THE UNITED STATES
 Mailing Address P.O. Box 18452
 City State Zip Code
 Washington DC 20036
 Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2009
Transaction ID: SA11B.5413
 Amount of Each Receipt this Period
 21.60
 FEC ID number of contributing federal political committee. **C** C00370221
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 283.20

SUBTOTAL of Receipts This Page (optional) ► 283.20
TOTAL This Period (last page this line number only) ► 283.20

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

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

FOR LINE NUMBER: PAGE 10 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	0	/	2	0	0	9

Transaction ID: SA17.5408

Amount of Each Receipt this Period
475.00

Repayment

B. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	5	/	2	0	0	9

Transaction ID: SA17.5409

Amount of Each Receipt this Period
475.00

Repayment

C. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3799.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	9

Transaction ID: SA17.5410

Amount of Each Receipt this Period
2849.47

Repayment

SUBTOTAL of Receipts This Page (optional) ► **3799.47**

TOTAL This Period (last page this line number only) ► **3799.47**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

<p>A. Full Name (Last, First, Middle Initial) Jennifer Hiser</p> <p>Mailing Address 47-08 47th Avenue</p> <p>City Woodside, State NY Zip Code 11377</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5398 Date of Disbursement 08 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 251.25</p>
<p>B. Full Name (Last, First, Middle Initial) Priority Press</p> <p>Mailing Address 61-B Tec St</p> <p>City Hicksville, State NY Zip Code 11801</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5405 Date of Disbursement 11 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 3105.31</p>
<p>C. Full Name (Last, First, Middle Initial) Shalimar Restaurant</p> <p>Mailing Address 35 Central Avenue</p> <p>City Albany, State NY Zip Code 12210</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.5401 Date of Disbursement 09 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 180.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3536.56

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)

PAGE 12 / 14

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

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

<p>A. Full Name (Last, First, Middle Initial) Keegan Stephan</p> <p>Mailing Address 312 E 140th St, Apt 2</p> <p>City Bronx State NY Zip Code 10454</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p>	<p>Transaction ID: SB21B.5394 Date of Disbursement <input type="text"/> 08 / <input type="text"/> 20 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 240.00</p>
<p>B. Full Name (Last, First, Middle Initial) Studio 4 East</p> <p>Mailing Address 103 West Main St.</p> <p>City Allegany State NY Zip Code 14706</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p>	<p>Transaction ID: SB21B.5390 Date of Disbursement <input type="text"/> 07 / <input type="text"/> 21 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 416.00</p>
<p>C. Full Name (Last, First, Middle Initial) Studio 4 East</p> <p>Mailing Address 103 West Main St.</p> <p>City Allegany State NY Zip Code 14706</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>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:</p>	<p>Transaction ID: SB21B.5391 Date of Disbursement <input type="text"/> 07 / <input type="text"/> 28 / <input type="text"/> 2009</p> <p>Amount of Each Disbursement this Period <input type="text"/> 417.98</p>

SUBTOTAL of Disbursements This Page (optional) ►

1073.98

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)

PAGE 13 / 14

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

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A.	Full Name (Last, First, Middle Initial) Studio 4 East		Transaction ID: SB21B.5407	
	Mailing Address 103 West Main St.		Date of Disbursement 12 / 04 / 2009	
	City Allegany	State NY	Zip Code 14706	Amount of Each Disbursement this Period 540.80
	Purpose of Disbursement		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶

540.80

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

5151.34

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 / 14	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr James Maceda	Nature of Debt (Purpose): Repayment of amounts taken
Mailing Address 814 D Larchmont Acres	
City State ZIP Code Larchmont NY 10538	

Outstanding Balance Beginning This Period	Transaction ID: SD9.5012	
3800.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3800.00

1) SUBTOTALS This Period This Page (optional).....	3800.00
2) TOTALS This Period (last page this line number only).....	3800.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	3800.00