

# 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

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

M M /

D D /

Y Y Y Y

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 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Espallat for Congress**

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

	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))....	19450.00	699299.01
(b) Total Contribution Refunds (from Line 20(d)) .....	10550.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8900.00	699299.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2171.00	678701.59
(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)).....	2171.00	678701.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6871.21	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	76904.02	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Espallat for Congress

Report Covering the Period: From: 10 / 01 / 2014 To: 12 / 31 / 2014

I. RECEIPTS

COLUMN A Total this Period

COLUMN B Election Cycle Total as of

COLUMN C Total for

11 / 04 / 2014 (date of general election)

11 / 05 / 2014 (date after general election)

through

12 / 31 / 2014 (last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
  - (i) Itemized (use Schedule A)

18950.00

660467.01

4100.00

(ii) Unitemized

500.00

38832.00

100.00

(iii) Total of contributions from individuals

19450.00

699299.01

4200.00

(b) Political Party Committees

0.00

0.00

0.00

(c) Other Political Committees

0.00

0.00

0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 44

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
19450.00	699299.01	4200.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
442.92	0.00	442.92
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
19892.92	699299.01	4642.92

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 44

Write or Type Committee Name

Espallat for Congress

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
2171.00	678701.59	771.00
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
10550.00	0.00	10550.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 44

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

10550.00	0.00	10550.00
----------	------	----------

**21. OTHER DISBURSEMENTS**

0.00	1800.28	0.00
------	---------	------

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

12721.00	680501.87	11321.00
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

8900.00	699299.01	-6350.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

2171.00	678701.59	771.00
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-300.71
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	19892.92
25. SUBTOTAL (add Line 23 and Line 24).....	19592.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12721.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	6871.21

**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 44
	<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)  
**Maritza Alvarez**

Mailing Address 2062 49th St

City Astoria State NY Zip Code 11105-1206

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

Name of Employer self Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 10 / 2014

**Transaction ID : VNJ3JDHARJ6**

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
**Pedro Alvarez**

Mailing Address 1411 townsend ave

City State Zip Code

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

Name of Employer P. Alvarez Assoc. Occupation accountant

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHARV7**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Rafael A. Alvarez**

Mailing Address 122 Lockwood Rd

City Cortlandt Manor State NY Zip Code 10567-1063

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

Name of Employer Atax Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 24 / 2014

**Transaction ID : VNJ3JDHASE7**

Amount of Each Receipt this Period  
600.00

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

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

1400.00

**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 8 OF 44
	<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)  
**Victor Castillo**

Mailing Address 14341 249th St

City State Zip Code  
Rosedale NY 11422-2505

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

Name of Employer self Occupation consultant

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2014

**Transaction ID : VNJ3JDHAS56**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Luis O. Diaz**

Mailing Address 710 W 190th St  
Apt D

City State Zip Code  
New York NY 10040-2903

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2014

**Transaction ID : VNJ3JDHARW5**

Amount of Each Receipt this Period  
250.00

**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 English & Associates Occupation 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  
12 / 16 / 2014

**Transaction ID : VNJ3JDJEH04**

Amount of Each Receipt this Period  
250.00

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

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

800.00

**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 9 OF 44
	<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)  
**John Estevez**

Mailing Address 6 McLean Ave  
6 McLean Avenue

City Yonkers State NY Zip Code 10705-2356

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

Name of Employer Foodtown/ Estevez Group INC Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 24 / 2014

**Transaction ID : VNJ3JDHASF5**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2 Bayberry Dr

City Saddle River State NJ Zip Code 07458-2610

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

Name of Employer Ceo Occupation 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  
 10 / 24 / 2014

**Transaction ID : VNJ3JDJEG92**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1 E Broadway

City Long Beach State NY Zip Code 11561-4116

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

Name of Employer NYC DOE Occupation principal

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS07**

Amount of Each Receipt this Period  
250.00

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

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

5250.00

**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 44
	<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)  
**Emmanuel Heredia**

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS80**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Francisco A. Knipping-Diaz**

Mailing Address 4791 Broadway  
4791 Broadway

City State Zip Code  
New York NY 10034-4943

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

Name of Employer Occupation  
Rosenblatt, Fransciello & Knipping-Dia Attorney at Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDJECJ4**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Rafael A. 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  
Self Doctor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS30**

Amount of Each Receipt this Period  
 250.00

**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 11 OF 44
	<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)  
**Scott Metzner**

Mailing Address 1361 Amsterdam Ave

City State Zip Code  
New York NY 10027-2510

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

Name of Employer Occupation  
The Janus Company 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  
12 / 16 / 2014

**Transaction ID : VNJ3JDJEGX0**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Nasrallah Y Misk**

Mailing Address 3751 76th St

City State Zip Code  
Jackson Heights NY 11372-6544

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 03 / 2014

**Transaction ID : VNJ3JDHARQ5**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Miguel A Montas**

Mailing Address 1618 Saint Nicholas Ave

City State Zip Code  
New York NY 10040-3311

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

Name of Employer Occupation  
Caridad Restaurant/Owner Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2014

**Transaction ID : VNJ3JDJEGT6**

Amount of Each Receipt this Period  
1000.00

**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 12 OF 44
	<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)  
**Juvenal Nunez**

Mailing Address 15 Yonkers Ter

City Yonkers State NY Zip Code 10704-3307

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

Name of Employer 756 Hardware Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS72**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Fresia Olivero-Momani**

Mailing Address 173 Strawtown Rd

City New City State NY Zip Code 10956-6830

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

Name of Employer electro diagnostics pc Occupation marketing director

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS64**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ricardo E. Oquendo**

Mailing Address 400 E 57th St

City New York State NY Zip Code 10022-3019

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

Name of Employer Self/Lawyer Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : VNJ3JDHAS14**

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 13 OF 44
	<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)  
**Espailat for Congress**

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

Mailing Address 182 W 180th St

City State Zip Code  
Bronx NY 10453-2905

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

Name of Employer Occupation  
Elegante General Manager

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 16 / 2014

**Transaction ID : VNJ3JDHARR3**

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  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : VNJ3JDJEG19**

Amount of Each Receipt this Period  
1000.00

**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  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : VNJ3JDJEG35**

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 14 OF 44
	<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)  
**Victor B Solis**

Mailing Address 1558 Longfellow Ave  
Apt 1

City State Zip Code  
Bronx NY 10460-5604

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

Name of Employer Occupation  
NYC DOE Teacher

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2014

**Transaction ID : VNJ3JDHARX3**

Amount of Each Receipt this Period  
250.00

**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  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2014

**Transaction ID : VNJ3JDJECG8**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 37 W 12th St

City State Zip Code  
New York NY 10011-8502

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

Name of Employer Occupation  
President Washington Square Partners

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  
12 / 16 / 2014

**Transaction ID : VNJ3JDJEH37**

Amount of Each Receipt this Period  
1000.00

**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 15 OF 44
	<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)  
**Jose Viloria**

Mailing Address 182 W 180th St

City State Zip Code  
Bronx NY 10453-2905

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

Name of Employer Occupation  
Nys Federation/Livery Livery

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  
11 / 05 / 2014

**Transaction ID : VNJ3JDJEGR1**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nicole Zernone**

Mailing Address 1803 Riverside Dr  
Apt 6H

City State Zip Code  
New York NY 10034-5328

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2014

**Transaction ID : VNJ3JDHAS22**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

18950.00

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

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

FOR LINE NUMBER: PAGE 16 OF 44  
(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)  
**JOSW PIMENTEL**

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  
 11 / 17 / 2014

**Transaction ID : VNJ3JDJEFT4**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

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)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

300.00

300.00

**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 17 OF 44			
	<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) <b>A. Bedford Grove LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 349 5th Ave			Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : VNH4A9Y92T1</b>
City New York	State NY	Zip Code 10016-5019	
Purpose of Disbursement NGP fees		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>B. Bedford Grove LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 349 5th Ave			Amount of Each Disbursement this Period 700.00 <b>Transaction ID : VNH4A9Y92V9</b>
City New York	State NY	Zip Code 10016-5019	
Purpose of Disbursement NGP fees		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>C.</b>			Date of Disbursement M M / D D / Y Y Y Y
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	2100.00

**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 18 OF 44			
	<input type="checkbox"/> 17 <input checked="" 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) <b>A. Dennie Beach</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 1760 2nd Ave Apt 22C		Amount of Each Disbursement this Period 350.00
City New York	State NY	
Zip Code 10128-5396	Purpose of Disbursement 010	<b>Transaction ID : VNH4A9Y9399</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William S. Friedman</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 320 Central Park W Apt 18B		Amount of Each Disbursement this Period 500.00
City New York	State NY	
Zip Code 10025-7659	Purpose of Disbursement 010	<b>Transaction ID : VNH4A9Y93D1</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cirilo Moronta</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 5 Markham Cir		Amount of Each Disbursement this Period 1400.00
City Englewood	State NJ	
Zip Code 07631-5039	Purpose of Disbursement 010	<b>Transaction ID : VNH4A9Y9374</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Form/Schedule: SB20A

Transaction ID : VNH4A9Y9399

per June 27th letter

Form/Schedule: SB20A

Transaction ID: VNH4A9Y93D1

per June 27th letter

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

Form/Schedule: SB20A

Transaction ID : VNH4A9Y9374

per June 27th letter

Form/Schedule:

Transaction ID:

**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 21 OF 44			
	<input type="checkbox"/> 17 <input checked="" 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) <b>A. Bernardo Pena</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014	
Mailing Address 280 Renfrew St			Amount of Each Disbursement this Period 2600.00	
City Methuen	State MA	Zip Code 01844-4701	Transaction ID : VNH4A9Y9332	
Purpose of Disbursement		Category/ Type 010		
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>B. Teodoro Regus</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014	
Mailing Address 321 Concord Rd			Amount of Each Disbursement this Period 2600.00	
City Yonkers	State NY	Zip Code 10710-1848	Transaction ID : VNH4A9Y92Z0	
Purpose of Disbursement refund contribution		Category/ Type 010		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Richard Simon</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014	
Mailing Address 1550 S Indiana Ave			Amount of Each Disbursement this Period 2600.00	
City Chicago	State IL	Zip Code 60605-2857	Transaction ID : VNH4A9Y9324	
Purpose of Disbursement		Category/ Type 010		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Form/Schedule: SB20A

Transaction ID : VNH4A9Y9332

per Oct. 8th letter

Form/Schedule: SB20A

Transaction ID: VNH4A9Y9324

per Oct. 8th letter.

**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 23 OF 44			
	<input type="checkbox"/> 17 <input checked="" 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) <b>A. Pedro Zamora</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 9517 32nd Ave		Amount of Each Disbursement this Period 500.00
City East Elmhurst	State NY Zip Code 11369-1849	
Purpose of Disbursement	Category/Type 010	<b>Transaction ID : VNH4A9Y93C3</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	10550.00

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

Form/Schedule: SB20A

Transaction ID : VNH4A9Y93C3

per June 27th letter

Form/Schedule:

Transaction ID:

**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 <b>Sm-Ali Amanollahi</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2600.00"/>	<b>Transaction ID : VNF5T9HA707</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2600.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dennie Beach</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 1760 2nd Ave Apt 22C	
City State Zip Code New York NY 10128-5396	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="350.00"/>	<b>Transaction ID : VNF5T9HA6S3</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="350.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ravenel Boykin Curry IV</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 106 Central Park S Apt 27A	
City State Zip Code New York NY 10019-1578	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="2600.00"/>	<b>Transaction ID : VNF5T9HA6Y1</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2600.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="5550.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA707

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6S3

general election contribution to be refunded

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA6Y1

general election contribution to be refunded

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Espailat for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Angel Cardenas</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 1299 Corporate Dr Apt 1505	
City State Zip Code Westbury NY 11590-6650	

Outstanding Balance Beginning This Period 100.00	<b>Transaction ID : VNF5T9HA6M4</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>William S. Friedman</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 320 Central Park W Apt 18B	
City State Zip Code New York NY 10025-7659	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : VNF5T9HA722</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Paul Gagliardi</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 21 Centre St	
City State Zip Code Bronx NY 10464-1522	

Outstanding Balance Beginning This Period 2600.00	<b>Transaction ID : VNF5T9HA6W5</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	3200.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6M4

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA722

general election contribution to be refunded

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6W5

general election contribution to be refunded

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Espailat for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cecilia Kemble</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 106 Central Park S Apt 27A	
City State Zip Code New York NY 10019-1578	

Outstanding Balance Beginning This Period 2600.00	Transaction ID : VNF5T9HA6P0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Miram Group LLC</b>	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 11000.00	Transaction ID : VNF5T9H9M56	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Miram Group LLC</b>	Nature of Debt (Purpose): automated calls
Mailing Address 5030 Broadway Ste 807	
City State Zip Code New York NY 10034-1666	

Outstanding Balance Beginning This Period 2119.44	Transaction ID : VNF5T9HAEZ7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2119.44

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	15719.44
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6P0

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HAEZ7

automated calls

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Espailat for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mirram Group LLC</b>		Nature of Debt (Purpose): automated calls
Mailing Address 5030 Broadway Ste 807		
City State	Zip Code	
New York	NY 10034-1666	

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HAF05</b>	
<input type="text" value="2334.58"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2334.58"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cirilo Moronta</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 5 Markham Cir		
City State	Zip Code	
Englewood	NJ 07631-5039	

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HA6Q7</b>	
<input type="text" value="1400.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1400.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dario A Oleaga</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 48 Hillcrest Ave		
City	State	Zip Code
Yonkers	NY	10705-1614

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HA6R5</b>	
<input type="text" value="2400.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2400.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="6134.58"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HAF05

automated calls

Form/Schedule: SD10

Transaction ID: VNF5T9HA6Q7

general election contribution to be refunded

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA6R5

general election contribution to be refunded

Form/Schedule:

Transaction ID:

**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 <b>Bernardo Pena</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 280 Renfrew St		
City	State	Zip Code
Methuen	MA	01844-4701

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HA730</b>	
<input type="text" value="2600.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2600.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jona S Rechnitz</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 747 3rd Ave		
City	State	Zip Code
New York	NY	10017-2803

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HA6V9</b>	
<input type="text" value="5000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="5000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Red Horse Strategies</b>		Nature of Debt (Purpose): primary day field operation
Mailing Address 55 Washington St Ste 624		
City	State	Zip Code
Brooklyn	NY	11201-1062

Outstanding Balance Beginning This Period	<b>Transaction ID : VNF5T9HA756</b>	
<input type="text" value="22000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="22000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="29600.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA730

over limit contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6V9

general election contribution to be refunded

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA756

canvas / field operation primary day

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Espailat for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Teodoro Regus</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 321 Concord Rd		
City State	Zip Code	
Yonkers	NY 10710-1848	

Outstanding Balance Beginning This Period 2600.00		<b>Transaction ID : VNF5T9HA714</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Richard Simon</b>		Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 1550 S Indiana Ave		
City State	Zip Code	
Chicago	IL 60605-2857	

Outstanding Balance Beginning This Period 2600.00		<b>Transaction ID : VNF5T9HA6Z9</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Elizabeth Smith</b>		Nature of Debt (Purpose): communication services
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period 6000.00		<b>Transaction ID : VNF5T9HA748</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	11200.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA714

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6Z9

general election contribution to be refunded2

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA748

communication services

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 42 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Espailat for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bernard Spitzer</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 730 5th Ave	
City State Zip Code New York NY 10019-4105	

Outstanding Balance Beginning This Period 2600.00	<b>Transaction ID : VNF5T9HA6N2</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Eliot Spitzer</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 730 5th Ave Fl 22	
City State Zip Code New York NY 10019-4105	

Outstanding Balance Beginning This Period 2400.00	<b>Transaction ID : VNF5T9HA6T1</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Pedro Zamora</b>	Nature of Debt (Purpose): excessive (general election) contribution
Mailing Address 9517 32nd Ave	
City State Zip Code East Elmhurst NY 11369-1849	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : VNF5T9HA6X3</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	5500.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	76904.02
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	76904.02

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : VNF5T9HA6N2

general election contribution to be refunded

Form/Schedule: SD10

Transaction ID: VNF5T9HA6T1

general election contribution to be refunded

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

Form/Schedule: SD10

Transaction ID : VNF5T9HA6X3

general election contribution to be refunded

Form/Schedule:

Transaction ID: