F	FEC ORM 3X	A	ND	DISE	OF RE BURSE	MENT	S				EIVED
).	NAME OF COMMITTEE (in fi		VPE OF	PRINT ¥		amplo: If typ er the lines.	xing, type	12FE4M	· · ·	UTAI	L CENTE
	anufact nc Fede	ral	01	<del>1</del> C		- <b>1</b> . 1			a	CW	York
	RESS (number and	streel)	57.	88_W	i de wa	ters	Pari	cway		-baada a -	
	Check if differ than proviousl reported. (ACI	ÿ,	Şyr	nacu	Se			N.Y.	132	14-1	
•	FEC IDENTIFICA	TION NUN	IBER 1	•		***		STATE 🛦		ZIP COD	E
	C 00 53	291	1		3. IS THIS REPORT	r	NEW (N) <b>OR</b>		AMENDED (A)		
•	TYPE OF REP( (Choose One)	DRT		eport	Feb 20 (M2	?)	May 20 (M5)	Aı	ng 20 (MB)	(	Nov 20 (M11) Non-Eluction Year Onlys
	(a) Quarterly Ropo	rts:	Q	ue On:	Mar 20 (M3	1}	Jun 20 (M6)	50	ap 20 (M9)		Dec 20 (M12) Non-Election Rate Only)
	April 15 Quarterty	Report (Q1)	(0)		Apr 20 (M4)		Jul 20 (M7)		ct 20 (M10)		lan 31 (YE)
	October 1			12-Day PRE-Elec Report to		Primary (12 Convention			al (12G) Il (12S)	۲	lunoif (12R)
	January 3	Report (Q3) 1 Report (YE)			Election on			•		in the State of	
	July 31 M	id-Year on-election	(d)	30-Day <b>POST-Ek</b> Report fo		General (3	)G)	Runoff	(30R)	S	ipecial (30S)
	Terminatio (TER)	n Report	÷		Election on	<b>.</b>		• • • •		in the State of	
	Covering Period	10	C	12	015	through	12	31	20	15	
	rtify that I have exa a or Print Name of		Report	and to the	F, O	owledge and Sta	belief it is tru	ie, correct a	and complete	3.	
gn	ature of Treasurer	$\zeta$		-pe	$\sim$	- <b>;</b> .	:. <b>r</b>	Date ()	21	12	015
эт	E: Submission of fai	se, eroneo	us, or Ir	icomplete ini	formation may e	ubject the pe	irson signing th	nis Report to	the penaltie	s of 2 U.(	S.C. §437g.
	Office Use Only									FORN av. 12/200	

. 1

I

FEC Form 3X (Rov. 02/2003)	SUMMARY PAGE.	Page 2
Write ar Type Committee Name Manufacturers Assoc.	of Contral N	Y Inc Federal PAC
Report Covering the Period: Fram:	н О. 19. 2 , У. У. У. 9 	1 <b>α α</b> 2 το <sup>5</sup> το <sup>2</sup> γ 1 <b>V</b> 1 <b>V</b> 1 <b>V</b> <b>Ο</b> <b>Ο</b> <b>Ο</b> <b>Ο</b> <b>Ο</b> <b>Ο</b> <b>Ο</b> <b>Ο</b>
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, $2\check{O}\check{I}\check{4}$		, <u>, , ,</u> , <u>,</u> O
(b) Cash on Hand at Beginning of Reporting Period		
(c) Total Receipts (from Line 19)	,	n en antina a construir en ser en antina en antina En antina en antina e En antina en antina e
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	· · · · · O	
7. Total Disbursements (from Line 31)	, , <i>O</i>	$\mathcal{O}$
B. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, <i>,</i> Ô	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	· · · · · · · · · · · · · · · · · · ·	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	Ô	
This committee has qualified as a multicandid	ate 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

1503-140-0276

FEC Form 3X (Rov. 08/2004) Vito or Type Committee Name Manufactures Assoc	<u>A</u>	Conti	al NY	Too For	Page 3
M D Report Covoring the Period: From:	D B	Y LIVE Y	у То:	a a v h v	- <del>Y</del> Y Y Y -
I. Receipts	 To	COLUMN A tal This Per		COLUMN Calendar Year-	
Contributions (other than loans) From:					
(a) Individuals/Persons Other					
Than Political Committees			$\hat{\mathbf{O}}$	· · · ·	$\mathbf{n}$
(i) Itemized (use Schedule A)	,	,	.U	, , ,	.U
			$\land$	· · · ·	$\wedge$
(ii) Unitemized	3	,			.U
(iii) TOTAL (add			$\sim$	·	$\cap$
Lines 11(a)(i) and (ii)	• •	<b>*</b> ,	$\mathbf{U}$	, , ,	.0
(b) Political Party Committees			6		O
(c) Other Political Committees	,	<b>,</b> .	$\cdot \mathbf{V}_{\cdot}$	3 7	.0
(c) Units Foundar Continuess (such as PACs)			$\bigcirc$		$\bigcirc$
(d) Total Contributions (add Lines	<b>,</b> .	. 1	.0	- 1 <b>9</b> - 3	.0
11(a)(iii), (b), and (c)) (Carry					_
Totals to Line 33, page 5)	٩.		.O	, <b>,</b>	.0
. Translers From Alfiliated/Other	۰.	,		<b>5 9</b>	Ŭ
Party Committees			$\cap$		$\bigcirc$
	. *	?	.0	_ , , , ,	
All Loans Received	,	3	O	. 1 7	· ()
Lana Danaimanta Danainad			$\sim$		$\sim$
Loan Repayments Received	. 7	3	$\mathcal{O}$	. 7	.0
Offsøts To Operating Expanditures (Rafunds, Rebates, atc.)					
(Carry Totals to Line 37, page 5)			$\cap$		0
. Refunds of Contributions Made	,	3	.0		<i> U</i>
to Federal Candidates and Other					
Political Committees			$\bigcirc$		$\wedge$
Other Federal Receipts	1	,	.0	, , ,	.0
(Dividends, Interest, etc.)			6		$\bigcirc$
Transfers from Non-Federal and Levin Funds	1	;	.0	· · · · · · · · · · · ·	$\cdot \cdot \cdot$
(a) Non-Federal Account				· .	
(from Schedule H3)	,	,	$\cdot \mathcal{O}$	, <sup>1</sup> , <b>7</b>	. Ô
•		e .	· ·		
(b) Levin Funds (from Schedule H5)	3.	ÿ	$\mathcal{O}_{\mathcal{O}}$		.0
c) Total Transfers (add 18(a) and 18(b))			$\mathcal{O}$		0
	7	•			- <del>-</del>
•				)	
				· · · · · · · · · · · · · · · · · · ·	
Total Receipts (add Lines 11(d).					
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))			$\bigcirc$		$\sim$
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		3	.Ô	۲. ۲	.0
12, 13, 14, 15, 16, 17, and 18(c))	• .	3	.Ô	• z	.0
	· .	,	.O	, , , ,	0. 0

FEBAN026"

Γ	- FEC Form 3X (Rov. 02/2003)	DETAILED. SUMMARY PAGE of Disbursements	Page 4
	II. Disbursements	COLUMN A	COLUMN B
21.	Operating Expenditures: (a) Allocated Fodoral/Non-Federal Activity (from Schedule H4) (i) Federal Share	, , , O	Calendar Year-to-Date
	(ii) Non-Federal Share (b) Other Federal Operating	, <u>,</u> , , , , O	, , O
	Expenditures (c) · Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22.	Transfers to Affiliated/Other Party Committees	, , <u>,</u> O	, , <u> </u>
23.	Contributions to Federal Candidates/Committees and Other Political Committees	, , .0	, , , , , , , , , , , , , , , , , , , ,
24.	Independent Expenditures		
26.	(use Schedule-E)	······································	
26.	Loan Repayments Made	, , .)	$\mathbf{r}$ , $\mathbf{r}$
	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	, , . , , .0	, O
	(b) Political Party Committees	$\cap$	$\bigcirc$
	(c) Other Political Committees	, , .0	, , , , , , , , , , , , , , , , , , , ,
	(such as PACs)	· · · · · · · · · · · · · · · · · · ·	$\mathbf{r}_{ij} = r \cdot \mathbf{r}_{ij}$
	(d) Total Contribution Refunds	$\wedge$	$\sim$
	(add Lines 28(a), (b), and (c))	, , .0	
29.	Other Disbursements	, , <u>.</u> O	$\dots, \dots, \dots, \dots, \dots, \bigcup_{i=1}^{n}$
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Sharø	, , O	, , .O
	<ul> <li>(ii) "Levin" Share</li> <li>(b) Federal Election Activity Paid Entirely With Federal Funds</li> </ul>	, , .O	, 0
	(c) Total Federal Election Activity (add Lines 30(a)(i). 30(a)(ii) and 30(b))►	, , Õ	, , , O ,
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , O	, , O
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	$\bigcirc$	

i T

ł

FEGAN026

		Page 5
I. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than toans)         (from Line 11(d), page 3)         Total Contribution Refuncts         (from Line 28(0))         Not Contributions (other than toans)         (subtract Line 34 from Line 33)	0 1,1,1,1,07 0	0 0
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	· · · · · · · · · · · · · · · · · · ·	6 0
(subtract Line 37 from Line 36)		and a second
u (6+	1. (q 0	
		ta te t
· • ·		
		an na san sa
	· .	
1 ' · · ·		
	• • • • • • • •	
na serie de la companya de la company	•	• • • • • •
1994 - A.	•	• •
	·, 	
	· · · ·	
	• • ·	
	. <b></b>	

SCHEDULE A (FEC Form 3)	0 r		T	FOR LINE NUMBER: PAGE OF
ITEMIZED RECEIPTS	~	Use separate si		(check only one)
TI WING WEVEN IS		for each catógo Dotuited Summ;		11a 11b 11c 12
		······		13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statemonts may	not be sold or u	cal computer	izon for the purpose of soficiting contributions
NAME OF COMMITTEE (In Full)	THE TRAINER ADTO 1601	and a mult bout	Ser Craminico	to Surgar Commencements HOMI SULTI COMBHINED.
	1	<u> </u>		ANT TI DA
VILLIAMITACTURIC Y	HSSOC.	<u>ot 1'4</u>	mal	NY Inc. Federal PAC
Full Namo (Linst, First, Middle Initial) A.				
A Mailing Address				Date of Receipt
City	£12-12-	The Parts		<b>-</b> - · · ·
City	Stato	Zip Codo		Amount of Each Receipt this Period
FEC ID number of contributing	······			
lederal political committee.	С			, , , . O
Name of Employer	Occupation			-
Repelpt For:	Aggrogate Y	car-lo-Dalo V		
Primary General Other (specify) w	· .	• t	$\cap$	
anna fabranki 🗭	,		· U	
Full Name (Last, First, Middle Initial)	****	an data da		
B.		······		Date of Receipt
Mailing Address				$\mathbf{M} = \{\mathbf{M} \mid \mathbf{y} \in \{\mathbf{N} \mid \mathbf{h} \mid \mathbf{y} \in \{\mathbf{y} \mid \mathbf{y}\} \mid \mathbf{y} \in \{\mathbf{y}\} \}$
City	State	Zip Code		-
		· ·		Amount of Each Receipt this Period
FEC ID number of contributing	С			$\wedge$
federal political committee.	-			
Name of Employer	Occupation	Ph. 4	· ·	
Receipt For:				4
Primary General	Aggregate Y	ear-to-Date 🖤	_	
Other (specify) 🖤			. 🔿	1
Euff Nome // and Eines Middle Law-th				
Full Name (Last, First, Middle Initial) C.				Date of Receipt
Mailing Address	·····			
Chy	State	Zip Code		-
vny	્રગ્યતાસ	CIP COOR		Amount of Each Receipt this Period
FEC ID number of contributing	<b>~</b> ·			
federal political committee.	C			, , ,
Name of Employer	Occupation			-1
Receipt For: Primary General	Aggregate Ye	ear-to-Date V		
Other (specify)	1		$\sim$	
	:	;		
			,	$\sim$
SUBTOTAL of Receipts This Page (optional)	)	·····	•	
TOTAL This Period (last page this line numb	aer oniv)		· · · · · · · · · · · · · · · · · · ·	$\sim$
			•	, , ,

Т

I

I

SCHEDULE B (FEC Form 3X)		FOR LINE	for the second sec	PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	y ono) 22 [23 [24]	1 25 - 28
	Dotailod Summary Pago	27	280 280 28	
Any information copied from such Reports and Statem or for community purposes, other than using the name	nonts may not be sold or uson to and address of any politica	d by any porce I committee to	on for the purpose of solici colicit contributions from s	ling contributions such committee.
NAME OF COMMITTEE (In Full)	a ilat	A IN .	i ie i	.1"
Manufactures Assoc.	of Contral	NY 7	In Feder	n1 Dar
Full Namo (Last, First, Middle Initial)	ALL AND ALLAND		and and Degrad Conner Jacobier (C. 2016).	MALLIN-
<b>A</b> .			Date of Disbursement	
Mailing Address	·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ·····, ······		M M - 25 - 64 L	1 8 3 5
City	State Zip Code			
Purpuse of Disbursement				
Candidate Name			Amount of Each Disburs	sement this Period
	]	Calegory/ Type	ļ <u>,</u> ,	, . <i>O</i>
Office Sought: House Disbursen			1	-
	Primary General Other (specily)			
State: District:				
Full Name (Last, First, Middle Initial) B.			Date of Disbursement	······
			G 4 June 1	
Mailing Address				P
City S	State Zip Code			
Purpose of Disbursement	1		Amount of Each Disburs	sement this Period
Candidate Name		Calegory/ Type		
Office Sought: House Disburser	nem For:	- 180	,	
	Primery General			
President	Other (specify) 🖤			
Full Name (Last, First, Middle Initial)				
<b>C.</b>	· .		Date of Disbursement	
Mailing Address			a ar	·
Cily S	State Zip Code			*******
Purpose of Disbursament				
Candidate Name		Category/	Amount of Each Disburg	sement this Period
Office Sought: House Disburser	ani For	Туре	• •	· ()
-	Primary General		١	
President	Other (specify)	. 1	ſ	
State: District:				
SUBTOTAL of Disbursements This Page (optional)			· •	. 0
TOTAL This Period (last page this line number only).		••••••	• • •	$\tilde{O}$

\_

. \_.\_

-

ł

HEDULE C (FEC Fo ANS		Uso separato schedulo(s)	PAGE	OF
•		for each category of the Detailed Summary Page	FOR LINE	13 of form 3X
AE OF COMMITTEE (In Full)		entral NY In	C. Fed	prat PA
Mailing Address			Other (specify	) 🗸
Cily	Slate Zl	P Code	······	
Original Amount of Loan	Cumulative Payme	Int To Date Balance	Outstanding at	Close of This Peri
3 1	. <i>O</i> , '	, . ()	• ;	• • •
TERMS Date Incurred	Date	Due Interost Rate	*****	Secured:
			% (apr)	Yes 1
List All Endorsers or Guaran	tors (if any) to Loan Source	****		
1. Full Name (Last, First, Mik		Name of Employer		
Mailing Address	·	Occupation		
		Amount		
City	State ZIP Code	Guaranteed Outstanding:	,	Ċ
2. Full Name (Last, First, Mid	lle Initial)	Name of Employer	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mailing Address	99-104-104-104-104-104-104-104-104-104-104	Occupation		
	New Yin Code	Amount		· · · · · · · · · · · · · · · · · · ·
City .	State ZIP Code	Guaranteed Outstanding:	•	· 0
3. Full Name (Last, First, Mid	he Initial)	Name of Employer		***
Mailing Address		Occupation		
	۱۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰	Amount	······································	·····
City	State ZIP Code	Guaranteed Outstanding:	,	•
4. Full Name (Last, First, Mid	le Initial)	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	State ZIP Code	Guaranteed Outstanding:	,	Ó
	,,			$\sim$
	age (optional)			ſ

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

ł

CHEDULE C-1 (FEC Form 3X) OANS AND LINES OF CREDIT FROM deral Election Commission, Washington, D.C. 20463	M LENDING INSTITUTIONS	Supplementary for Information found on Page of Schedule C
AME OF COMMITTEE (In Full)	······································	FEC IDENTIFICATION NUMBER
Chilliantings Assoc of	Central'NY Inc Fel	C00532911
ENDING INSTITUTION (LENDER) ull Name	Amount of Loan	Interest Rate (APR)
r.	· · · · · · · · · · · · · · · · · · ·	. ()
lailing Address	Date Incurred or Established	
ily State Zip Codo	Dato Due	ны, резулятуе. 
A. Has toan been restructured?	fl yes, date originally incurrent	an a
B. If line of credit, Amount of this Draw: , , ,	Total Outstanding Balance:	
C. Aro other parties secondarily liable for the debt	incurred? lors must be reported on Schedule C.)	
property, goods, nogotiable instruments, contifica stocks, accounts receivable, cash on deposit, or No Yes II yes, specify: 	r other similar traditional collateral?	Does the lender have a perfected security interest in it? No Yes What is the estimated value?
collateral for the loan? No Yes If	yes, specily:	, , .Ô
A depository account must be established pursu to 11 CFR 100.82(e)(2) and 100.142(e)(2).	uant Location of account:	
Date account established:	Address:	
1 W D Z D D Z Y Y Y L		
	City, State, Zip:	
F. If neither of the types of collateral described abo the loan amount, state the basis upon which this G. COMMITTEE TREASURER Typed Name Signature	ove was pledged for this loan, or if the	amount pledged does not equal or exceed ich it assures repayment.
F. If neither of the types of collateral described abo the loan amount, state the basis upon which this G. COMMITTEE TREASURER Typed Name Signature	ove was pledged for this loan, or if the	ich it assures repayment. DATE
<ul> <li>F. If neither of the types of collateral described aborthe loan amount, state the basis upon which this</li> <li>G. COMMITTEE TREASURER Typed Name Signature</li> <li>H. Attach a signed copy of the toan agreement.</li> <li>I. TO BE SIGNED BY THE LENDING INSTITUTI <ol> <li>To the best of this institution's knowledge, are accurate as stated above.</li> <li>II. The toan was made on terms and condition similar extensions of credit to other borrow fill. This institution is aware of the requirement.</li> </ol> </li> </ul>	Dive was pledged for this loan, or if the is loan was made and the basis on wh is loan was made and the basis on wh ION: the terms of the loan and other inform ons (including interest rate) no more fa vers of comparable credit worthiness. It that a toan must be made on a basis	DATE DATE Nation regarding the extension of the loan vorable at the time than those imposed for a which assures repayment, and has
<ul> <li>F. If neither of the types of collateral described aborthe loan amount, state the basis upon which this</li> <li>G. COMMITTEE TREASURER Typed Name Signature</li> <li>H. Attach a signed copy of the toan agreement.</li> <li>I. TO BE SIGNED BY THE LENDING INSTITUTI <ol> <li>To the best of this institution's knowledge, are accurate as stated above.</li> <li>II. The toan was made on terms and condition similar extensions of credit to other borrow</li> </ol> </li> </ul>	Dive was pledged for this loan, or if the is loan was made and the basis on wh is loan was made and the basis on wh ION: the terms of the loan and other inform ons (including interest rate) no more fa vers of comparable credit worthiness. It that a toan must be made on a basis	DATE DATE Nation regarding the extension of the loan vorable at the time than those imposed for a which assures repayment, and has

HEDULE D (FEC Form 3 BTS AND OBLIGATIONS cluding Loans		(Uso sopurate schodula(s) fur cach numbercel line)	PAGE OF FOR LINE NUMBER: (check only one) 9 10
ME, OF, COMMITTEE (In Full) ANHACTURES ASSO A. Full Namo (Last, First, Middlo Initia	C of Central N	Inc Fede	Doth (Purpose):
Mailing Address			
City State	Zip Codo		
Outstanding Balanco Beginning This	0	Period Outstand	ting Balance at Close of This Peri
2 - 1	() , ,	$\wedge$	ng € 1 m anta 1 m a an a
B. Full Name (Last, First, Middle Initial	$\mathbf{\nabla}$	<u> </u>	Debt (Purpose):
•	• #č. i •		
Mailing Address			
City State	Zip Code		
Amount Incurred This Period	$\bigcap$ , ,	0	ling Balance at Close of This Pe
C. Full Name (Last, First, Middle Initia	al) ef Dobtor or Creditor	Nature of	Debt (Purpose):
	• p., •	• • • •	 مین اور ا
Çily	State Zip Code		
Outstanding Balance Beginning This	Period		********
Amount Incurred This Period	Payment This F	Period Outstand	ling Balance at Close of This Pe
· · · · · · · · · · · · · · · · · · ·	0,,,	$\mathcal{O}$	· · · · · · · · · · · · · · · · · · ·
SUBTOTALS This Period This Page (	(optionat)	••••••••••••••••••••••••••••••••••••••	,
TOTALS This Period (last page this li	ne number only)	······	1
TOTAL OUTSTANDING LOANS from	Schedule C (last page only)	······ •	,
ADD 2) and 3) and carry forward to a	appropriate line of Summary Page (las		Ť

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (HI FUN)	FEC IDENTIFICATION NUMBER V
Check H 24-hour wolks 48-hour notice	C00532911
Full Namo (Laci, Firoi, Mikidio Initial) of Payso	
Mailing Address	Amount
City State Zip Code	, , <i>.</i> Ø
Туре	fflice Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Calendar Your-To-Date Per Election for Office Sought , , O	isbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ O Type	tilice Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Calendar Year-To-Date Per Election for Office Sought	isbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	· · · , · · O
(b) SUBTOTAL of Unitermized Independent Expenditures	, , O
(c) TOTAL Independent Expenditures	, , <u>,</u>
Under penally of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of ent party committee) any political party committee or its agent.	
	<b>1</b>
Signature	

.

I.

ĺ

ì

	FOR FEDER	GNATED AGENT(S) AL OFFICE		PAGE OF
J.S.C. §441a(d)) (To	be used only by	Political Committees in the	General Election)	FOR LINE 25 OF FORM
NE OF COMMITTEE (In Full)	of Con	tral NY Inc.	Federal PAC	Check if 24-hour notice
your committee brien designated to mi dinated expenditures by a political part YES NO ES, name the designating committee:	y committee?	I Namo of Subordinato Comm	tillee t	
1	, City	V	Sta	io ZIP Code
Full Name (Last, First, Middle Inilia) of	Eách Payeo	TTILL P	I Purpose of Expe	Inditure
		With the work of the	· · · ·	
Mailing Address	Contraction of the		The second s	Categor Categor
		fetere	Date	
City	Stato	Zip Code		3 () · · · ¥ `)
Name of Fodoral Candidate Supported	Office Sought:	House State:	Amount	
		Senale Disuict: Presidential		(
Aggregate General Election Expenditure for this Caudidate 🕨	7	· · · C	Limit Rai	sed Due to Opponent's Sp S.C. §441a(1)/441a-1)
Full Name (Last, First, Middle Initial) of	Each Payee		Purpose of Expe	inditure
Mailing Address				Catego Type
		J Žin Codet	Date	
City City	State -			ې کې کې کې کې د د
City Name of Federal Candidate Supported		·	Amount	
		House State:	Amount	
Name of Federal Candidate Supported		House Statu:	,	(
Name of Federal Candidate Supported		House State:	, Limit Rai:	(
Name of Federal Candidate Supported Aggregate General Election Expenditure for this Candidate ►	Qtflice Sought:	House State: Senate District: Presidential	, Limit Rai:	( sed Due to Opponent's Sp S.C. §441a(i)/441a-1)
Name of Federal Candidate Supported Aggregate General Election Expenditure for this Candidate ►	Qtflice Sought:	House State: Senate District: Presidential	, Limit Rait ing (2 U.	sed Due to Opponent's Sp S.C. §441a(1)/441a-1) anditure
Name of Federal Candidate Supported Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of	Qtflice Sought:	House State: Senate District: Presidential	, Limit Rait ing (2 U. Purpose of Expe	sed Due to Opponent's Sp S.C. §441a(i)/441a-1) enditure Catego
Name of Federal Candidate Supported Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Mailing Address	Qtflice Sought:	House State: Senate District: Presidential	, Limit Rait ing (2 U.	sed Due to Opponent's Sp S.C. §441a(i)/441a-1) enditure Catego
Name of Federal Candidate Supported	Each Payee State	House Statu: Senate District: Presidential	, Limit Rait ing (2 U. Purpose of Expe	( sed Due to Opponent's Sp S.C. §441a(i)/441a-1)

T

-

## SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER
- DRIVE AND EXEMPT ACTIVITY COSTS THEN IN A SECOND
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full) USE ONLY ONE SECTION, A or B A. State and Local Party Committees Fixed Percentage (select one) Presidential-Only Election Year (28% Federal) Presidential and Senate Election Year (36% Federal) Senate-Only Election Year (21% Federal) Non-Presidential and Non-Senate Election Year (15% Federal) Separate Segregated Funds and Nonconnected Committees B. Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check or If the committee is spending more than 50% federal funds, indicate ratio below Federal..... Nonfederal ..... . This ratio applies to (check all that apply): -Administrative **Generic Voter Drive** Public Communications Referencing Party Only

LOCATION RATIOS		PAGE OF
ME OF COMMITTEE (IN FUR) ANIHOCTUVERS ASSOC. OF CONTR	al NY Inc. Federa	1 PAC
TIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRE		ŧ.
TIVITIES APPEARING ON THIS REPORT.		
Ihods of allocation: I. FUNDRAISING activities are allocated using the "lunds	required method" where the fulleral a	monation of
<ul> <li>oxpenses must equal the federal propertion of monies r</li> </ul>	raisod.	
II. Shared DIRECT CANDIDATE SUPPORT activities are a whore the foderal propertion of disbursements is based tivity. For PACs Only: Direct candidate support includes federal and nonloderal candidates, regardless of whether are allocated using a time/space method.	on the benefit derived by federal can s public communications or voter drive	didates from the ac- is that refer to both
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support	• <sup>o</sup> 'n	• •/
New Revised Some as Previously	y Reported	
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Cendidate Support	·	. n
CHECK IF THE RATIO IS: , New Revised Same as Previously	y Reported	
ACTIVITY OR EVENT IDENTIFIER		}
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support		0.
CHECK IF THE RATIO IS:		
New Revised Same as Previously	/ Reported	
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support	· · · ·	
CHECK IF THE RATIO IS:	Descard	
New Revised Same as Previously	/ reported	
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support		
CHECK IF THE RATIO IS:		
New Revised Same as Previously	Heported	
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support	4. •B	
CHECK IF THE RATIO IS:	.0	

Т

I.

ì

# SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

RANSFERS FROM NONFEDERA	L ACCOUNTS FOR DERAL ACTIVITY	PAGE OF
NAME OF COMMITTEE (IN FUIL)		FOR LINE 180 OF FORM 3X
NAME OF ACCOUNT	The second	TAL AMOUNT TRANSFERRED
	88 po, 2999	, , .0
BREAKDOWN OF TRANSFER RECEIVE i) Total Administrative	D	,
ii) Generic Voter Drivo		,
HI) Exempt Activities		, , Õ
iv) Direct Fundraising (List Activity or Ex	vent Identilier)	-
a)	, , .Ô	· · ·
b)	· · · O	•
c) Total Amount Transferred For Direct	T Fundraising	, ,
v) Direct Candidate Support (List Activi	ity or Evont Identifier)	
a)	, , . Õ	
(d	, , <u>)</u>	
c) Total Amount Transforred For Direct	a Candidate Support	, , , , , , , , , , , , , , , , , , ,
vi) Public Communications Referring O	Daty to Party (Made by PAC)	<u>e e so e e para en conce</u> to de
TOT	TALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	······································	. O
OTAL This Period (Generic Voler Drive)		0
TOTAL This Period (Exempt Activities)		0
OTAL This Period (Direct Fundraising)	· ·	
OTAL This Period (Direct Candidate Support)	)	
OTAL This Period (Public Communications R	teleming Only to Party),	
OTAL This Period (Total Amount Transferred)	)	

FEC Schedule HB (Form SX) Rev. 12/2004

FE6AN026

BURSEMENTS FOR ALLC DERAL/NONFEDERAL ACT	• • • • • • • • •				PAGE OI	·· ··
E OF COMMITTEE (In Full)	of Co	intral N	Y Inc.	Federal	PAC	***
iull Namo (Laci, Firei, Midolo Initial)		Seller	1	Aflocated Activity o	· · · · · · · · · · · · · · · · · · ·	
Aailing Addroso	<u></u>		<u></u>	Voter Drive	Fundraising	
Sity	State	Zip Code				• •
- NY	JIGID	2 <b>4</b> 0000			(ref to party only)	
Purposo of Disbursoment:			}		or Event Year-To	
Activity or Event Identifier:			· ·	,	1	<u>· C</u>
unony (n Evons wonning).			Category/ Type	e a Date	is trong ¥	· ·
FEDERAL SHARE	+	NONFEDERA	. SHARE		TOTAL AMOUNT	
	)	1 <b>,</b>	. (	$\mathcal{T}$	, 1	. 7
Full Name (Lact, First, Middle Inilial)				Attocated Activity of	or Event:	
			18	Administrative	Fundraising	Exer
Mailing Address				Voter Drive	Direct Candi	date Supj
City	State	Zip Code		Public Comm	(ret to party only)	) by PAC
• 		· · · · · · · · · · · · · · · · · · ·	······	Allocated Activity	or Event Year-To	>Date
Purpose of Disbursement:						ſ
Activity or Event Identifier:			-	·	•	<u> </u>
			Category/ Type	Dato	9 <sup>1</sup> :• '.	<b>、</b> .
FEDERAL SHARE	+	NONFEDERA	SHARE	= 1	TOTAL AMOUNT	•
s, s ·	$\cap$			$\frown$ .	•	. (
Full Name (Last, First, Middle Initial)				Allocated Activity of	r Event:	
		·····		Administrative		; Exer
Mailing Address				Voter Orive	Direct Candid	date Supp
Zity	State	Zip Code		. Public Comm	(ref to party only)	by PAC
- 3			·····		or Event Year-To	-
Purpose of Disbursement:		• •				/
Activity or Event Identifier:	·····		<b>1</b> .	······	• , 	· (
·		•	Category/ Type	Date	<b>4 4 5</b>	. ,
FEDERAL SHARE	+	NONFEDERA	SHARE	÷ 1	OTAL AMOUNT	
	5			~		
	<u>ノ</u>	+ + بروجها الواطر المراجع	. (	<u>)</u>	****	
ITOTAL of Allocated Federal and NonFederal	Jeral Activity Thi	-				
FEDERAL SHARE	<b>→</b>	NONFEDERAL	SHARE	<b>≕</b> τ	OTAL AMOUNT	
,, , , , , , , , , , , , , , , , ,	)	· •	Ľ.	),	,	(
AL This Period (last page for each line (	only)(Federal sh					
FEDERAL SHARE		NONFEDERAL	SHARE	1	OTAL AMOUNT	

FEC Schedule H4 (Form 3X) Rev. 12/2004

1

NSFER	H5 (FEC Form 3X) S OF LEVIN FUNDS D FEDERAL ELECTIC		
		al Party Committees Only)	FOR LINE 180 OF
ME OF CO	MMITTEE (in Full)	<del>na ittis teasa 1990 matta 4900 maya</del> ana ana ana ama	FOR LINE TOD OF FORM
banif	acturers Assoc	DE Contral NY	Inc Federal PAC
NAME OF A	CCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BREAKDOV	VN OF THIS TRANSFER		· · ·
ij	Voter Registration	VOTER REGISTI	RATION
;	Total Amount Transforred for Vot		()
		· · ·	NOTER ID
4)	Voter ID Total Amount Transferred for Vol-	er ID	
		1. 2 ×1/× 1.4×6 2	
69	GOTV		GOTV
م مع	Total Amount Transferred for GO	<b>TV</b>	and the second second second
, (v)	Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
,		neric Campaign Activity	
			· · · O
NAME OF A	CCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
• .		14 15 / D D V V V V	
•			
RREAKDON	NN OF THIS TRANSFER		
	Voter Registration	VOTER REGIST	RATION
4	Total Amount Transferred for Vot	er Registration	. Ó
	Maa		VOTER ID
	Voter ID Total Amount Transferred for Vot	er 10	
•		s	,
111}	GOTV		GOTV
	Total Amouni Transferred for GO	TV	,
A LE LE MAR	Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
, <b>,</b>		neric Campaign Activity	(
			, , , , , , , , , , , , , , , , , , , ,
	TOTALS FOR B	REAKDOWN OF TRANSFER RECEIVED (L	ast Page Only)
	•	····	•
τοτοι	L This Period (Voter Registration).		$\bigcap$
	m ma rona (roas nagazani)	5 3	$, \mathcal{O}$
TOTA	L This Period (Voter ID)	e	$\sim$
t to the second s		1	· · · · ·
TATA	This Period (GOTVA		$\sim$
IUTA			,
TOTA	This Period (Generic Compales	Activity)	
TOTAL	L This Period (Generic Campaign	Activity)	; , , , , , , , , , ()
		Activity)	

FE6AN028

.

ļ.

T

i

FEC Schedule H5 (Form 3X) Rev. 02/2003

SCHEDULE H6 (FEC Form 3X)				
DISBURSEMENTS OF FEDERAL AND LEVIN FUN FOR ALLOCATED FEDERAL ELECTION ACTIVITY				OF
To be used by State, District and Local Party Committees	Only)	<b>i</b> ( )	FOR LINE 30a	OF FORM 3X
Manufacturers Assoc. of Contra	INY	Too E	Edom	DAC
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocate	Activity or Event:	
		Voter Regis	tration Gei	GOTV neric Campalgr
Mailling Address		Allocated Ac	divity or Event Yea	r-To-Date
City Slate Zip Code	1	, ,	ة 	<u>· O</u>
Purpose of Disbursement	Category/ Type	Date	21 a	4 × 4
FEDERAL SHARE + LEVIN SH		 =	TOTAL AMOUNT	•
		$\frown$		$\frown$
8. Futl Name (Last, First, Middio Initial) / Futl Organization Name	-	<u> </u>	d Activity or Event	· <u> </u>
B. Fuil Namo (Last, First, Naudio Unital) / Fuil Organization Name		Voter ID	dration	GOTV neric Campaign
Mailing Address		Allocated Ar	divily or Event Yes	ar-To-Date
City Slate Zip Code	1	··· ,	f	<u> </u>
Purpose of Disbursement	Category/	Date	: .· . "	У¥;
FEDERAL SHARE + LEVIN SH	IARE		TOTAL AMOUNT	•
		$\bigcirc$	۰ <i>ب</i>	
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Aus - 19, 49 - 90 - 19 - 19 - 19 - 19 - 19 - 19 - 1	Type of Aflocate Voter Regis	d Activity or Event stration Ge	: GOTV neric Campaigi
Malling Address		- Allocated A	ctivity or Event Yea	ar-To-Date
City State Zip Code		-,	\$	•
Purpose of Diabursement	Category/ Type	Date	ti	¥ 7.
FEDERAL SHARE + LEVIN SH	-h	 =	TOTAL AMOUNT	 [
	· 7		; <b>-</b>	
SUBTOTAL of Shared Federal and Levin Activity This Page FEDERAL SHARE + LEVIN SH	IARE	=	TOTAL AMOUNT	<u> </u>
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) an FEDERAL SHARE	. ( nd Levin share t	) o 30(a)(ii))	TOTAL AMOUNT	. () r
TOTAL This Period for the Levin Share	аме . 7	<b>`</b>	<b>x</b> ,	D

FEC Schedule H6 (Form 3X) Rev. 02/2003

ì

T

## SCHEDULE L (FEC: Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (IN FUIL) Manufactures Assoc NAME OF ACCOUNT	of Contral NY Inc.	Federal PAC
Manufacture 2	COLUMN A TOTAL THIS PERIOD	COLUMN B
1. RECEIPTS FROM PERSONS (a) Itemized	, , 6	, , O
(b) Uniternizod	, , O	• • • •
(c) Total	, , · Ò	
2. OTHER RECEIPTS	, , · O	, , , , 0
3. TOTAL RECEIPTS	, , . 0	,, J
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schuddo L-D)	arth-n- dig Malari fairligan ing Titog digtang gang gang an ing panangang ang pang bang sa gang bang sa sa sa s	
(a) Voter Registration	,	$\bigcup_{i=1}^{n}$
(b) Voter ID	, , Ö	, , . 0
(c) GOTV	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(d) Generic Campaign		
(e) Total		
6. TOTAL DISBURSEMENTS	, , , O	, , Ō
7. BEGINNING CASH ON HAND	······································	, , , , O
8. RECEIPTS	, , O	, O
9. SUBTOTAL	, , O	, , . 0
10. DISBURSEMENTS	$\bigcirc$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11. ENDING CASH ON HAND	$\bigcirc$	Ő

.

: ..

. .

• •

....

î.

i

SCHEDULE L-A (FEC Form 3X)	<b></b>	PAGE OF
ITEMIZED RECEIPTS OF LEVIN FUNDS	Use separate schedule(s) for each category of tho	
	for each category of the Aggregation Page	(check only one)
Any information copied from such Reports and Statements may n or for commercial purposes, other than using the name and addre	tot be sold or used by any persons of any period	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
	Charles MA	TITAN
Pull Name (Last, First, Middlo Initia) / Full Organization Name	Leatra I PNY	Date of Receipt
A.		Date of Hecenpt D. M. C. O. M. C. C. C. M.
Mailing Addross		
City		Amount of Each Receipt this Period
Cily Str	ale Zip Code	· · · · · · · · · · · · · · · · · · ·
Name of Employer or Principal Place of Business		, , · · O
Occupation		Aggregate Year-to-Date
· · · · ·		O
Full Name (Last. First, Middle Initial) / Full Organization Name		Date of Receipt
B		R BA S D D Y Y Y V
Mailing Address		۲۰۰۰۰۰ ۱۹۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰
	ate Zip Code	Amount of Each Receipt this Period
-	·	$\sim$
Name of Employer or Principal Place of Business		Aggregate Year to Date
Occupation		
Edd Name di ant. Enne Middle Miller i C. 1. C		, <u>,</u> . (_
Full Name (Last, First, Middle Initial) / Full Organization Name C.		Date of Receipt
Mailing Address		
maining movied		Amount of Each Receipt this Period
City	nte Zip Code	
Name of Employer or Principal Place of Business		· · · O
Annualize		Aggregate Year-to-Date
Occupation		, , <i>C</i>
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
D.		
Mailing Address		
City Sta	ite Zip Code	Amount of Each Receipt this Period
·		~
Name of Employer or Principal Place of Business		Annanata Vaarta-Data
Occupation		Aggregate Year-to-Date
		· · · O.
		$\wedge$
SUBTOTAL of Receipts This Page (optional)		· · · ()
TOTAL This Period (last page this line number only)	••••••	, , ,

۰.

SCHE	DULE	LB	(FEC	Form	3X)
ITEMI	ZED D	ISBUR	<b>ISEM</b>	ENTS	
OF LE	EVIN F	UNDS			

SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS OF LEVIN FUNDS Any information copied from such Reports and Statements may	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE OF (check only one) 4a 4b 4c 4c 5 4d 4d 4d
Any information copied from such reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Manufactures Assoc of Full Name (Last, First, Middle Inflat) / Full Organization Nam	dress of any political committee to	solicit contributions from such committee.
A	NG	Date of Disbursement $f(\hat{\mathbf{x}}_{i}) = \hat{\mathbf{y}}_{i} + \mathbf{$
Mailing Address		$\frac{\partial f}{\partial t} = \frac{\partial f}{\partial t} + $
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		$\mathbf{T}_{\mathbf{r}} = \left\{ \mathbf{T}_{\mathbf{r}} = \left\{ \mathbf{T}_{\mathbf{T}} = \left\{ \mathbf{T}$
Full Name (Last, First, Middle Initial) / Full Organization Nan	ne	Date of Disbursement Million (Although the Direction of the State
Mailing Addreas		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization Nam 2.	ng	Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		1 ····), ··· ··· ··· ···
Full Name (Last, First, Middle Initial) / Full Organization Nam ),	ne	Date of Disbursement
Mailing Address		ເລີຍ ເບັຍໄດ້ ¥ີ່ ¥ ເ
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		· · · 6
Full Name (Last. First, Middle Initial) / Full Organization Nam	ne l	Date of Disbursement
Mailing Address		the table of the form of the state of the s
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
SUBTOTAL of Disbursements This Page (optional)		
TOTAL This Period (last page this line number only)		, () ,

A.

8.

C.

D,

E.

MAILED FROM ZIP CODE 1 RECEIVED ATES POST 004390486 Commission AM 8:41 2015 FEB 23 FEC MAIL CENTER 20463 3 2 1503-140-0296 lection ( tee loshing to dera 5788 Widewaters Parkway Syracuse, NY 13214

### Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

Date of Receipt Hand Delivered Postmarked USPS First Class Mail 2/11/15 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt **Received from Electronic Filing Office** Date of Receipt or Postmarked Other (Specify): PREPÄRER DATE PREPARED (8/2013)