PAGE 1 / 21

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Cor	nmittee			Office Use Only
NAME OF COMMITTEE (in	TYPE OR PR		Example: If typin over the lines.	g, type	12FE4M5	
FISCHER FO	R CONGRESS					1
ADDRESS (number a		OGA RD PMB 410				
Check if di	fferent					
than previous reported. (A					NY 1	12302
2. FEC IDENTIFI	CATION NUMBER ▼	CITY ▲			STATE A	ZIP CODE
C C005543	45	3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	STATE ▼ DISTRICT ED NY 20
4. TYPE OF RE	PORT (Choose One)					
(a) Quarterly F	,	(b) 12-Day PR	E-Election Repo	ort for the:		
		×	Primary (12P))	General (1	2G) Runoff (12R)
April 1	5 Quarterly Report (Q1)		Convention (12C)	Special (12	2S)
July 15	Quarterly Report (Q2)		,		,	
Octobe	er 15 Quarterly Report (Q3)	Election o	n 06 /	26	2014	in the NY State of
Januar	y 31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Rep	oort for the:		
			General (30G	i)	Runoff (30	R) Special (30S)
Termina	ation Report (TER)	Election o	n /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D D D D D D D D D D D D D D D D	/ Y Y Y Y Y 2014	through	M M M 06	/ D D /	2014
I certify that I have e	examined this Report and	to the best of my l	knowledge and	belief it is tr	rue, correct and	complete.
Type or Print Name	of Treasurer Stacey J. F	antauzzi				
Signature of Treasur	er Stacey J. Fantauzzi		[Electronically 1	Filed] [Date 07	15 / 2014
NOTE: Submission of	false, erroneous, or incom	plete information ma	y subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office						FEC FORM 3
Use Only						(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 21

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

FISCHER FOR CONGRESS

04 06 04 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 4915.00 49424.49 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 1000.00 1000.00 (from Line 20(d)) (c) Net Contributions (other than loans) 3915.00 48424.49 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 36868.97 42318.37 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 36868.97 42318.37 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 11042.76 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5000.00 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

FISCHER FOR CONGRESS

06 04 2014 04 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 3910.00 42080.40 (i) Itemized (use Schedule A)..... 1005.00 6349.97 (ii) Unitemized..... (iii) TOTAL of contributions 4915.00 48430.37 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 944.12 (such as PACs)..... 0.00 50.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 4915.00 49424.49 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 5000.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 5000.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 4915.00 54424.49 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OP	ERATING EXPENDITURES	36868.97	42318.37
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b)	Of All Other Loans	0.00	0.00
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REI	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	1000.00	1000.00
			0.00	0.00
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	()	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	1000.00	1000.00
21.	ОТІ	HER DISBURSEMENTS	63.36	63.36
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	37932.33	43381.73
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	44060.09
24	TO	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	4915.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		48975.09
26.	то	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	37932.33
7	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	11042.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FEC ID number of contributing

General

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

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

federal political committee.

Other (specify)

Name of Employer

Receipt For: 2014

Primary

C.

FOR LINE NUMBER: **PAGE** 5 OF 21 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 11d Detailed Summary Page 12 13a 13b 14

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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Charles Bejian Date of Receipt Mailing Address 615 Pine Woods Ave. 05 2014 01 City State Zip Code Transaction ID: SA11AI.4470 NY 12180 Troy FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation donation J. Stone Press President Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Cornea Consultants of Albany Date of Receipt Mailing Address 9 Vista Blvd 80 2014 City State Zip Code Transaction ID: SA11AI.4491 Albany NY 12259

C

Occupation

Election Cycle-to-Date

Full Name (Last, First, Middle Initial) New York Republican State Co	Date of Receipt	
Mailing Address 315 State Street	05 05 VIVIVIVIVIVIVIVIVIVIVIVIVIVIVIVIVIVIVI	
City	State Zip Code	Transaction ID : SA11AI.4481
Albany	NY 12210	Transaction ib . SATTAL 4401
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	1000.00 Donation
Receipt For: 2014	Election Cycle-to-Date	
Primary General Other (specify)	1000.00	

1000.00

2500.00

Amount of Each Receipt this Period

donation

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 6 OF (check only one) 11a 11b 11c 12

21

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11d Detailed Summary Page 13a 13b 14 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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Richard Paulsen Date of Receipt Mailing Address 11 Harrowgate Way 2014 06 City State Zip Code Transaction ID: SA11AI.4477 NY 12110 Latham FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation donation Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **David Pollitzer** Date of Receipt Mailing Address 100 Pond Hill Road 05 01 2014 City State Zip Code Transaction ID: SA11AI.4473 Altamont NY 12009 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation donation Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Walter L. Robb Date of Receipt Mailing Address 1358 Ruffner Road 2014 03 City State Zip Code Transaction ID: SA11AI.4212 NY Schenectady 12309 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 160.00 Name of Employer Occupation Self campaign donation Receipt For: 2014 Election Cycle-to-Date | Yrimary General Other (specify) 660.00 1160.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 7 Use separate schedule(s) (check only one) 11a 11b 11c

OF

21

for each category of the ITEMIZED RECEIPTS 11d Detailed Summary Page 12 13a 13b 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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Dean Rueckert Date of Receipt Mailing Address 638 Albany Shaker Road 06 2014 03 City State Zip Code Transaction ID: SA11AI.4483 NY 12211 Albany FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Donation Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify)

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

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

250.00

ım	nage# 14941824301					
	CHEDULE B EMIZED DIS	•	-	Use separate so for each catego Detailed Summa	ory of the	FOR LINE NUMBER: PAGE 8 OF 21 (check only one) X 17
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMIT	TTEE (In Full) OR CONGRES	SS			
	Full Name (Last, Fi	•				Data of Dishumanant
Α.	Benchemark	Printing				Date of Disbursement
	Mailing Address M	laxon Rd.				04 01 2014
	City		State	Zip Code		Amount of Each Disbursement this Period
	Schenectady		NY			005.44
	Purpose of Disburs Printing	sement			006	235.44
	Candidate Name				Category/ Type	Transaction ID : SB17.4575
	Office Sought:	House Senate President District:	Disbursement For Primary Other (s	General	, , , ,	
	Full Name (Last, Fi					
В.	Bethesda Co	•				Date of Disbursement
	Maining / Radiooc					04 14 2014
	City		State	Zip Code		Amount of Each Disbursement this Period
	Bathesda		MD			480.46
	Purpose of Disburs Hotel	sement			002	Transaction ID : SB17.4526
	Candidate Name FISCHER FO	OR CONGRE	SS		Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
	State: NY	District: 20				
	Full Name (Last, Fi	•				
C.	Capital Advo	cates				Date of Disbursement
	Mailing Address					04 15 2014
	City		State Zi	p Code		Amount of Each Disbursement this Period
Purpose of Disbursement Consultant Fee 001				5000.00		
	Candidate Name				Category/ Type	Transaction ID : SB17.4546
	Office Sought:	House Senate	Disbursement For Primary	: 2014 General		

Other (specify)

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

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

President

District:

State:

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:						GE	9	OF	21
Use separate schedule(s)	(check c	(check only one)								
for each category of the Detailed Summary Page		X	17		18	[19a] 19k
Detailed Summary Fage			20a		20b			20c		21
ay not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.										

	Detailed Sumr	nary Page	20a 20b 20c 21
	ly information copied from such Reports and Statements may not be sold of for commercial purposes, other than using the name and address of any particles.		person for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS		
۹.	Full Name (Last, First, Middle Initial) Cassella & Company Mailing Address		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing Candidate Name FISCHER FOR CONGRESS	006 Category/ Type	942.84 Transaction ID: SB17.4579
	Office Sought: House Disbursement For: 2014	al	
3.	Full Name (Last, First, Middle Initial) Clifton Park Repu Mailing Address		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code Purpose of Disbursement		Amount of Each Disbursement this Period 275.00
	Charitable Contribution Candidate Name FISCHER FOR CONGRESS Office Sought: March March	007 Category/ Type	Transaction ID : SB17.4556
Э.	State: NY District: 20 Full Name (Last, First, Middle Initial) Constant Contact Mailing Address		Date of Disbursement M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
	City State Zip Code MA Purpose of Disbursement Email Service Candidate Name FISCHER FOR CONGRESS Office Sought: House Senate President State: NY District: 20	003 Category/ Type	Amount of Each Disbursement this Period 210.60 Transaction ID : SB17.4521
s	UBTOTAL of Disbursements This Page (optional)		1428.44
т	OTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	NUMBE	R:		PAGE	10	OF	21
Use separate schedule(s)	(check on							
for each category of the Detailed Summary Page	X	17		18		19a		19b
		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions								

		Detailed Summar	y Page	20a 20b 20c 21
	ny information copied from such Reports and Stater for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
A.	Full Name (Last, First, Middle Initial) Constant Contact			Date of Disbursement 05 08 2014
	Mailing Address City S	State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Email	//A	003	318.60
	Candidate Name FISCHER FOR CONGRESS		Category/ Type	Transaction ID : SB17.4594
	Senate President State: NY District: 20	nent For: 2014 Primary General Other (specify)		
В.	Full Name (Last, First, Middle Initial) Dinosaur BBQ - Troy			Date of Disbursement
	Mailing Address 377 River Street			05 27 7 2014
	Troy	State Zip Code NY 12180		Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser Deposit Candidate Name		007	300.00 Transaction ID : SB17.4611
	FISCHER FOR CONGRESS	nent For: 2014	Category/ Type	
	Senate	Primary General Other (specify)		
C.	Full Name (Last, First, Middle Initial) Facebook			Date of Disbursement
	Mailing Address			M M / D D / Y Y Y Y O O O O O O O O O O O O O O O
	City State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Advertising		004	250.25 Transaction ID : SB17.4599
	Candidate Name FISCHER FOR CONGRESS Office Sought: A House Disburger	nent For: 2014	Category/ Type	
	Senate	Primary General Other (specify)		
S	SUBTOTAL of Disbursements This Page (optional)			868.85
Т	OTAL This Period (last page this line number only).			, ,

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate scl for each category Detailed Summan	nedule(s) (of the	OR LINE NUMBER: PAGE 11 OF 21 check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Facebook Mailing Address			Date of Disbursement 05 30 2014
Purpose of Disbursement Advertising Candidate Name FISCHER FOR CONGRESS Office Sought: House Senate President State: NY District: 20		004 Category/ Type	Amount of Each Disbursement this Period 167.41 Transaction ID: SB17.4620
Full Name (Last, First, Middle Initial) HUDSON VALLEY STRATEGIC PLA Mailing Address 29 Elliott Road	NNING PARTN	ERS INC	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Parsippany NJ Purpose of Disbursement Poll Candidate Name FISCHER FOR CONGRESS Office Sought: House Senate Prima Other State: NY District: 20	-	005 Category/ Type	Amount of Each Disbursement this Period 5240.00 Transaction ID: SB17.4714
Full Name (Last, First, Middle Initial) 2. James E. Walsh, Esq. Mailing Address			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement Professional Services Candidate Name FISCHER FOR CONGRESS Office Sought: House Senate President Prima Other		001 Category/ Type	Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.4570

State:

NY

District:

20

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

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: (check only one) X 17
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Kathode Ray Media			Date of Disbursement
Mailing Address			04 28 2014
City State Greenville NY	e Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement Website		004	467.50
Candidate Name FISCHER FOR CONGRESS		Category/ Type	Transaction ID : SB17.4535
Office Sought: House Disbursement Senate Print	t For: 2014 mary General ner (specify)	туре	
Full Name (Last, First, Middle Initial) Linda M Marek Mailing Address 442 Arthur St.			Date of Disbursement
City State	e Zip Code		04 08 2014
Schenectady NY Purpose of Disbursement	12306		Amount of Each Disbursement this Period 1000.00
Campaign Consultant		001	Transaction ID : SB17.4578
Candidate Name FISCHER FOR CONGRESS		Category/ Type	
President	t For: 2014 mary General ner (specify)		
State: NY District: 20 Full Name (Last, First, Middle Initial)			
c. Linda M Marek			Date of Disbursement
Mailing Address 442 Arthur St.			04 / D D / Y Y Y Y Y Y 21 2014
City State Schenectady NY	Zip Code 12306		Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Consultant	001		1000.00
Candidate Name FISCHER FOR CONGRESS		Category/ Type	Transaction ID : SB17.4558
Office Sought: House Disbursement Senate Print	t For: 2014 mary General ner (specify)		
State: NY District: 20			
			2467.50

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

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

SCHEDULE B (FEC Form 3)

PAGE 13 21 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Linda M Marek 2014 Mailing Address 442 Arthur St. 05 05 City State Zip Code Amount of Each Disbursement this Period NY Schenectady 12306 Purpose of Disbursement 1000.00 Campaign Consultant 001 Transaction ID: SB17.4564 Candidate Name Category/ FISCHER FOR CONGRESS Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President NY State: District: Full Name (Last, First, Middle Initial) Linda M Marek Date of Disbursement Mailing Address 442 Arthur St. 05 21 2014 City State Zip Code Amount of Each Disbursement this Period NY 12306 Schenectady 1000.00 Purpose of Disbursement Campaign Consultant 001 Transaction ID: SB17.4574 Candidate Name Category/ FISCHER FOR CONGRESS Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: NY District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Linda M Marek Mailing Address 442 Arthur St. 06 03 2014 City State Zip Code Amount of Each Disbursement this Period Schenectady NY 12306 1000.00 Purpose of Disbursement Campaign Consultant 001 Transaction ID: SB17.4718 Candidate Name Category/ FISCHER FOR CONGRESS Type Office Sought: House Disbursement For: 2014 X General Senate Primary

President Other (specify) NY State: District: 20 3000.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

S

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	edule(s) of the	FOR LINE NUMBER: (check only one) X 17
	ly information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Media Well Done Mailing Address Albany Street			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Schenectady NY	Zip Code 12305		Amount of Each Disbursement this Period
	Purpose of Disbursement Palm Cards	12000	006	1327.45 Transaction ID : SB17.4715
	Candidate Name FISCHER FOR CONGRESS Office Sought: House Disbursement For	or: 2014	Category/ Type	
	Senate Primar			
В.	Full Name (Last, First, Middle Initial) Michele Baker			Date of Disbursement
	Mailing Address	04 01 7 2014		
	City State Hoosick Falls NY Purpose of Disbursement	Zip Code		Amount of Each Disbursement this Period 1250.00
	campaign Consultant Candidate Name FISCHER FOR CONGRESS		001 Category/ Type	Transaction ID : SB17.4577
	Office Sought: House Disbursement Fo		туре	
C.	Full Name (Last, First, Middle Initial) Michele Baker			Date of Disbursement
	Mailing Address			04 14 2014
	City State 2 Hoosick Falls NY Purpose of Disbursement	Zip Code		Amount of Each Disbursement this Period 1250.00
	Consultant Fee Candidate Name			Transaction ID : SB17.4551
	FISCHER FOR CONGRESS Office Sought: House Senate President Other State: NY District: 20		Type	

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

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

SCHEDULE B (FEC F ITEMIZED DISBURSE

Image# 14941824308			
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary	dule(s) (charter	DR LINE NUMBER: PAGE 15 OF 21 heck only one) X 17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. Michele Baker Mailing Address			Date of Disbursement 04 21 2014
City Hoosick Falls Purpose of Disbursement Consultant Fee Candidate Name FISCHER FOR CONGRESS Office Sought: House Senate President State: NY District: 20	State Zip Code NY rsement For: 2014 Primary General Other (specify)	001 Category/ Type	Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4554
Full Name (Last, First, Middle Initial) Michele Baker Mailing Address City Hoosick Falls Purpose of Disbursement campaign Consultant Candidate Name FISCHER FOR CONGRESS Office Sought: Yesident President	State Zip Code NY rsement For: 2014 Primary General Other (specify)	001 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Amount of Each Disbursement this Period 1250.00 Transaction ID: SB17.4563
Full Name (Last, First, Middle Initial) C. Michele Baker Mailing Address			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y 2014

c. Michele Baker

City Zip Code State Hoosick Falls NY Purpose of Disbursement Campaign Consultant 001 Candidate Name Category/ FISCHER FOR CONGRESS Type

Amount of Each Disbursement this Period 2500.00

Transaction ID: SB17.4573

Office Sought: Disbursement For: 2014 House Senate Primary General President Other (specify) State: NY District: 20

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

Candidate Name

Office Sought:

NY

State:

FISCHER FOR CONGRESS

District:

House

Senate

President

20

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

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

SC IT

lm	age# 14941824309			
IT	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS y information copied from such Reports and Statements me for commercial purposes, other than using the name and a		y of the ry Page	
	NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS			
Α.	Full Name (Last, First, Middle Initial) Stewarts Shop			Date of Disbursement
	Mailing Address	04 03 2014		
	City State NY Purpose of Disbursement	Zip Code		Amount of Each Disbursement this Period 65.65
	Candidate Name FISCHER FOR CONGRESS		002 Category/ Type	Transaction ID : SB17.4509
	Office Sought: House Senate President State: NY Disbursement For Primary Other (s	General		
	Full Name (Last, First, Middle Initial) Stewarts Shop			Date of Disbursement
B.	Mailing Address			04 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State NY	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Fuel Candidate Name			64.75 Transaction ID : SB17.4539
	FISCHER FOR CONGRESS Office Sought: Senate President State: NY District: 20 Disbursement For Primary Other (s	General	Туре	
_	Full Name (Last, First, Middle Initial) Stewarts Shop			Date of Disbursement
O.	Mailing Address			05 / D D / Y Y Y Y Y Y D D / Y 2014
	City State Zi	ip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Fuel		002	61.01
	Candidata Nama			Transaction ID : SB17.4586

General

Disbursement For: 2014

Primary

Other (specify)

Category/

Type

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	I I		FOR LINE NUMBER: PAGE 17 OF 21 (check only one) X 17		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			person for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS					
Full Name (Last, First, Middle Initial) Stewarts Shop			Date of Disbursement		
Mailing Address			05 12 2014		
City State NY	·				
Purpose of Disbursement Fuel Candidate Name			67.06 Transaction ID : SB17.4598		
		Туре			
State: NY District: 20 Full Name (Last, First, Middle Initial)					
Stewarts Shop Mailing Address			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City State	Zip Code		Amount of Each Disbursement this Period		
NY Purpose of Disbursement		53.01			
Fuel Candidate Name	002	Transaction ID : SB17.4602			
FISCHER FOR CONGRESS		Category/ Type			
State: NY District: 20 Full Name (Last, First, Middle Initial)					
c. Stewarts Shop			Date of Disbursement		
Mailing Address			05 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City State NY		Amount of Each Disbursement this Period			
Purpose of Disbursement Fuel	002	69.20			
Candidate Name FISCHER FOR CONGRESS			Transaction ID : SB17.4603		
Office Sought: House Disbursement F		Туре			
20					

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	PAGE	18	OF	21		
Use separate schedule(s)	(check onl						
for each category of the Detailed Summary Page	X	17	18		19a] 19b
Detailed Summary Fage		20a	20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions							

		Detailed Surfillar	y rage	20a	a	20b	20c	21
	ny information copied from such Reports and Statements may for commercial purposes, other than using the name and add							
	NAME OF COMMITTEE (In Full)	iless of any poin	licai committee	to solicit coi	Itributio	115 110111	Such Comi	milee.
\rangle	FISCHER FOR CONGRESS							
	Full Name (Last, First, Middle Initial)							
A.	Stewarts Shop			Date of I	Disburse	ement		
	Mailing Address	05 29 2014						
	City State NY	Amount of Each Disbursement this Period						
	Purpose of Disbursement Fuel	66.00 Transaction ID : SB17.4615				3.00		
	Candidate Name FISCHER FOR CONGRESS							
	Office Sought: House Disbursement For: 2	General						
В.	Full Name (Last, First, Middle Initial) Stewarts Shop		Date of Disbursement					
D.	Mailing Address	Date of Disbursement M M / D D / Y Y Y Y 06 01 _ 2014 _						
	City State Zip Code NY				Amount of Each Disbursement this Period			
	Purpose of Disbursement Staff Meal		002	Transactio		B17.462		6.59
	Candidate Name FISCHER FOR CONGRESS		Category/ Type					
	Office Sought: Yaman	General						
	Full Name (Last, First, Middle Initial)							
C.	Vista Print			Date of I			Y Y Y	
	Mailing Address				05 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State Zip C	Code		Amount	of Each	Disburse	ement this	Period
	Purpose of Disbursement Printing		004	L	y			1.07
	Candidate Name FISCHER FOR CONGRESS Category/ Type			Transaction	n ID : SE	317.4597	•	
	Office Sought: House Disbursement For: 2	General	76-					
<u></u>							343	3.66
	SUBTOTAL of Disbursements This Page (optional)		<u></u>	-	7			#
1 т	OTAL This Period (last page this line number only)				-			

SCHEDULE B (FEC Form 3)

PAGE 19 21 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Barbara Wheeler 2014 Mailing Address 200 Virginia Lane 04 80 G-10 City State Zip Code Amount of Each Disbursement this Period NY Amsterdam 12010 Purpose of Disbursement 400.00 Campaign Consultant 001 Transaction ID: SB17.4583 Candidate Name Category/ FISCHER FOR CONGRESS Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President NY State: District: Full Name (Last, First, Middle Initial) Barbara Wheeler Date of Disbursement Mailing Address 200 Virginia Lane 04 13 2014 G-10 City State Zip Code Amount of Each Disbursement this Period NY 12010 Amsterdam 400.00 Purpose of Disbursement Campaign Consultant 001 Transaction ID: SB17.4544 Candidate Name Category/ FISCHER FOR CONGRESS Type Disbursement For: Office Sought: 2014 House Senate Primary General Other (specify) President State: NY District: Full Name (Last, First, Middle Initial) Date of Disbursement C. YMCA Amsterdam Mailing Address 04 2014 16 City State Zip Code Amount of Each Disbursement this Period Amsterdam NY Purpose of Disbursement 125.00 Community Event 007 Transaction ID: SB17.4553 Candidate Name Category/

925.00 SUBTOTAL of Disbursements This Page (optional)..... 34614.89 TOTAL This Period (last page this line number only).....

General

Disbursement For: 2014

Primary

Other (specify)

Type

Office Sought:

NY

State:

FISCHER FOR CONGRESS

District:

House

Senate

President

20

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Purpose of Disbursement

PAGE 20 21 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page **X** 20a 20b 20c 21

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) FISCHER FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Cornea Consultants of Albany 2014 Mailing Address 9 Vista Blvd 05 05 City State Zip Code Amount of Each Disbursement this Period NY Albany 12259 1000.00 Purpose of Disbursement Refund 010 Transaction ID: SB20A.4496 Candidate Name Category/ FISCHER FOR CONGRESS Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President NY State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code

	Candidate Name		Category/ Type	
	Senate President	Disbursement For: Primary General Other (specify)		
	State: District:			
C.	Full Name (Last, First, Middle Initial)			Date of Disbursement
	Mailing Address			
	City	State Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			, ,
	Candidate Name		Category/ Type	
	Senate President	Disbursement For: Primary General Other (specify)		
	State: District:			

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

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

1000.00

1000.00

Amount of Each Disbursement this Period

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

21

×	13a
	13b

21

(check only one) Detailed Summary Page Transaction ID: SC/10.4163 NAME OF COMMITTEE (In Full) FISCHER FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary JAMES M FISCHER General Mailing Address Other (specify) ullet200 HOP CITY RD State ZIP Code City NY 12020 **BALLSTON SPA** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 01^M 09 ž014 0.00 demand % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) 5000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.