

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2009 JUL 17 AM 10:43

Office Use Only

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

ADDRESS (number and street) 52 SOUTH BROAD ST. NORWICH NY 13815

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 000207795

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
Election on ... in the State of ...

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on ... in the State of ...

5. Covering Period 01/01/2009 through 06/30/2009

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

Type or Print Name of Treasurer Shaunnatar M. Douglass

Signature of Treasurer [Signature] Date 07/09/2009

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

29030121295

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NBT PAL FEDERAL FUND

Report Covering the Period:

From:

6.1 / 0.1 / 2009

To:

06 / 30 / 2009

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

| | | |
|---|----------------|----------------|
| 6. (a) Cash on Hand January 1, 2009 | | 79.700 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 79.700 | |
| (c) Total Receipts (from Line 19) | 6250.00 | 6250.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 7047.00 | 7047.00 |
| 7. Total Disbursements (from Line 31) | 1000.00 | 1000.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 6047.00 | 6047.00 |
| 9. Debts and Obligations Owed TO 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) | | |

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

For further information contact:

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

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

29030121296

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

NBT PAC - FEDERAL FUND

Report Covering the Period: From:

01 / 01 / 2009

To:

06 / 30 / 2009

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4,150.00

4,150.00

(ii) Unitemized

2,100.00

2,100.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

6,250.00

6,250.00

(b) Political Party Committees

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

6,250.00

6,250.00

12. Transfers From Affiliated/Other Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0.00

0.00

17. Other Federal Receipts (Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5).....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

6,250.00

6,250.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

6,250.00

6,250.00

29030121297

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share | | | |
| (ii) Non-Federal Share..... | | | |
| (b) Other Federal Operating Expenditures | | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | | |
| 22. Transfers to Affiliated/Other Party Committees..... | | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | | 1,000.00 | 1,000.00 |
| 24. Independent Expenditures (use Schedule E) | | | |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | | | |
| 26. Loan Repayments Made..... | | | |
| 27. Loans Made..... | | | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | | | |
| (b) Political Party Committees | | | |
| (c) Other Political Committees (such as PACs)..... | | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | | | |
| 29. Other Disbursements | | | |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | | | |
| (ii) "Levin" Share..... | | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..... | | | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | | 1,000.00 | 1,000.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | | 1,000.00 | 1,000.00 |

29030121298

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 6,250.00 | 6,250.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 6,250.00 | 6,250.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | | |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | | |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | | |

29030121299

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE **6** OF **9**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NBT PAC FEDERAL FUND

Full Name (Last, First, Middle Initial)

A. Delaney, Timothy, E.

Mailing Address

P.O. Box J

City

Mayfield

State

NY

Zip Code

12117

FEC ID number of contributing federal political committee.

C 00207795

Name of Employer

Occupation

Director NBT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

01 / 05 / 2009

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Levy, Jeffrey

Mailing Address

701 Waldens Pond Rd

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing federal political committee.

C 00207795

Name of Employer

Occupation

NBT Bank

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

02 / 10 / 2009

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. Hurta, Gary, P.

Mailing Address

30 W. Pleasant St.

City

Hamilton

State

NY

Zip Code

13346

FEC ID number of contributing federal political committee.

C 00207795

Name of Employer

Occupation

NBT Bank

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 03 / 2009

Amount of Each Receipt this Period

500.00

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

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

2,500.00

2,500.00

29030121300

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 9

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

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NAME OF COMMITTEE (In Full)

NBT PAC FEDERAL FUND

Full Name (Last, First, Middle Initial)

A. **Winsman, Roberta, L.**

Mailing Address

103 Pleasant View Dr.

City

Rotine Bridge

State

NY

Zip Code

13428

FEC ID number of contributing federal political committee.

C 00207795

Name of Employer

NBT Bank

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,000.00

Date of Receipt

06 / 05 / 2009

Amount of Each Receipt this Period

3,000.00

Date of Receipt

06 / 06 / 2009

Amount of Each Receipt this Period

5,000.00

Date of Receipt

06 / 10 / 2009

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. **Carpenter, John S.**

Mailing Address

5179 West Rd.

City

Morrisville NY

State

Zip Code

13408

FEC ID number of contributing federal political committee.

C 00207795

Name of Employer

NBT Bank

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,000.00

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

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

1,100.00

29030121301

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE **8** OF **9**

(check only one)

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

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NAME OF COMMITTEE (In Full).

NBT PAC FEDERAL FUND

Full Name (Last, First, Middle Initial)

A. Forsythe, Daryl, R.

Mailing Address

21 Ridgeland Rd

City

Norwich

State

NY

Zip Code

13815

FEC ID number of contributing federal political committee.

C00207795

Name of Employer

Occupation

Director - NBT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,500.00

Date of Receipt

06 / 13 / 2009

Amount of Each Receipt this Period

2,500.00

Full Name (Last, First, Middle Initial)

B. Mitchell, John, C.

Mailing Address

10 Saunders Rd.

City

Ithaca

State

NY

Zip Code

14850

FEC ID number of contributing federal political committee.

C00207795

Name of Employer

Occupation

Director - NBT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,000.00

Date of Receipt

06 / 21 / 2009

Amount of Each Receipt this Period

3,000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

5,500.00

4,150.00

29030121302

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

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

FOR LINE NUMBER:
(check only one)

PAGE **9** OF **9**

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

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NAME OF COMMITTEE (In Full)

NBT PAC FEDERAL FUND

Full Name (Last, First, Middle Initial)

A.

Arcuri for Congress

Mailing Address
P.O. Box 8508

City **Utica** State **NY** Zip Code **13505**

Purpose of Disbursement
Contribution

Candidate Name
Michael Arcuri

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NY** District: **24th**

Date of Disbursement

MEM / DDD / YYYYYY
05 / 28 / 2009

Amount of Each Disbursement this Period

1,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MEM / DDD / YYYYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MEM / DDD / YYYYYY

Amount of Each Disbursement this Period

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

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

1,000.00

1,000.00

29030121303

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.

29030121304

| | |
|---|-----------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
|---|-----------------|

| | |
|--|------------|
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
|--|------------|

| | |
|---|-----------------------------|
| <input checked="" type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) 7/13/09 |
|---|-----------------------------|

| | |
|--|------------|
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |

| | |
|--|------------|
| <input type="checkbox"/> USPS Express Mail | Postmarked |
|--|------------|

| | |
|---|--|
| <input type="checkbox"/> Postmark Illegible | |
|---|--|

| | |
|--------------------------------------|--|
| <input type="checkbox"/> No Postmark | |
|--------------------------------------|--|

| | |
|--|---|
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| | Next Business Day Delivery <input type="checkbox"/> |

| | |
|--|-----------------|
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
|--|-----------------|

| | |
|---|-----------------|
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
|---|-----------------|

| | |
|---|-----------------|
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
|---|-----------------|

| | |
|---|-------------------------------|
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
|---|-------------------------------|

| | |
|---|--------------------------|
|  PREPARER | 7/17/09 DATE PREPARED |
|---|--------------------------|