

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

Canary Fund

ADDRESS (number and street)

PO Box 15293

Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

C C00555342

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

00

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 Judith Zamore

Signature of Treasurer Judith Zamore

[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
Canary Fund

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))....	22000.00	89750.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	22000.00	89750.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6380.70	17893.94
(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)).....	6380.70	17893.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	31381.06	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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)

Write or Type Committee Name

Canary Fund

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 01 / 2015 To: M M / D D / Y Y Y Y
09 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	21750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions from individuals	10000.00	21750.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	68000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	22000.00	89750.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	22000.00	89750.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6380.70	17893.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	40475.00
19. LOAN 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. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6380.70	58368.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15761.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	22000.00
25. SUBTOTAL (add Line 23 and Line 24).....	37761.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6380.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	31381.06

**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 5 OF 11
	<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)
Canary Fund

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

Mailing Address 41 Park Ave
Apt 5H

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
Kroll Bond Ratings Finance Executive

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : C6336102A

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) **10000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : C6336102AB

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
John P. Coffey

Mailing Address 3 Plateau Cir E

City State Zip Code
Bronxville NY 10708

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

Name of Employer Occupation
Kramer Levin Naftalis & Frankel LLP Attorney

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify) **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2015

Transaction ID : C6329453A

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

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

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

5000.00

**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 6 OF 11
	<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)
Canary Fund

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		27		2015

Transaction ID : C6329453AB

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Michael Waldorf

Mailing Address **590 Madison Ave**

City **New York** State **NY** Zip Code **10022-2524**

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

Name of Employer Occupation
Paulson & Co Senior Vice President

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		22		2015

Transaction ID : C6329449A

Amount of Each Receipt this Period
5000.00

* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		27		2015

Transaction ID : C6329449AB

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

5000.00

10000.00

**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 7 OF 11
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Canary Fund

A. Full Name (Last, First, Middle Initial)
National Potato Council Political Action Committee

Mailing Address 1300 L Street N.W. Suite 910

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00154104**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015

Transaction ID : C6321522

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Cox Enterprises PAC (COXPAC, Inc.)

Mailing Address 975 F St NW Ste 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2015

Transaction ID : C6278945

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
International Securities Exchange PAC

Mailing Address 60 Broad Street 26 Floor

City New York State NY Zip Code 10004

FEC ID number of contributing federal political committee. **C C00382226**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015

Transaction ID : C6321518

Amount of Each Receipt this Period
2500.00

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

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

7500.00

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

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NAME OF COMMITTEE (In Full)
Canary Fund

A. Full Name (Last, First, Middle Initial)
American Financial Services Association PAC

Mailing Address 919 18th St NW

City Washington State DC Zip Code 20006-5519

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : C6289799

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Zurich Holding Company of America Committee for Good Government (Z-PAC)

Mailing Address 1201 F St NW Ste 250

City Washington State DC Zip Code 20004-1220

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2015

Transaction ID : C6312499

Amount of Each Receipt this Period
 2000.00

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).....

4500.00

12000.00

**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 9 OF 11			
	<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)
Canary Fund

Full Name (Last, First, Middle Initial) A. NGP-VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 300.00 Transaction ID : D437131
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
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:		

Full Name (Last, First, Middle Initial) B. NGP-VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 300.00 Transaction ID : D437132
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
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:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 98.75 Transaction ID : D436443
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Merchant Fees	
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:		

SUBTOTAL of Disbursements This Page (optional).....	698.75
TOTAL This Period (last page this line number only).....	

**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 10 OF 11			
	<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)
Canary Fund

Full Name (Last, First, Middle Initial) A. Capitol Compliance Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address PO Box 15293		Amount of Each Disbursement this Period 846.88
City Washington	State DC	
Zip Code 20003-0293	Purpose of Disbursement Compliance Services	Transaction ID : D437137
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:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 296.25
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Merchant Fees	Transaction ID : D436188
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:		

Full Name (Last, First, Middle Initial) c. The Kauffman Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 328 Massachusetts Ave NE		Amount of Each Disbursement this Period 1238.82
City Washington	State DC	
Zip Code 20002-5702	Purpose of Disbursement Reimburse Catering	Transaction ID : D437133
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:		

SUBTOTAL of Disbursements This Page (optional).....	2381.95
TOTAL This Period (last page this line number only).....	

**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 11 OF 11			
	<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)
Canary Fund

Full Name (Last, First, Middle Initial) A. Washington Nationals Stadium, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 1500 S Capitol St SE Nationals Park			Amount of Each Disbursement this Period 1238.82
City Washington	State DC	Zip Code 20003-3599	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D437134 [MEMO ITEM]
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. The Kauffman Group			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 328 Massachusetts Ave NE			Amount of Each Disbursement this Period 3300.00
City Washington	State DC	Zip Code 20002-5702	
Purpose of Disbursement Reimburse Tickets		Category/ Type	Transaction ID : D437135
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) C. Washington Nationals Stadium, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 1500 S Capitol St SE Nationals Park			Amount of Each Disbursement this Period 3300.00
City Washington	State DC	Zip Code 20003-3599	
Purpose of Disbursement Tickets		Category/ Type	Transaction ID : D437136 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	6380.70