

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **PO BOX 98**  
Check if different than previously reported. (ACC) **SOUTH SALEM NY 10590**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00630681** 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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  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  /  /  07 01 2018 through  /  /  09 30 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Schwartz, Laura, A, ,  
Type or Print Name of Treasurer

Signature of Treasurer *Schwartz, Laura, A, ,* [Electronically Filed] Date  /  /  10 11 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**EMPIRE STATE PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="10029.92"/>	<input type="text" value="10029.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15509.92"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="13000.00"/>	<input type="text" value="28480.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="28509.92"/>	<input type="text" value="38509.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21024.70"/>	<input type="text" value="31024.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7485.22"/>	<input type="text" value="7485.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

EMPIRE STATE PAC

Report Covering the Period: From: 07 / 01 / 2018 To: 09 / 30 / 2018

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).....	0.00	5500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7000.00	17500.00
12. Transfers From Affiliated/Other Party Committees.....	5000.00	9980.00
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.....	1000.00	1000.00
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)).....▶	13000.00	28480.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13000.00	28480.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	24.70	24.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	24.70	24.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21000.00	30000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21024.70	31024.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21024.70	31024.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7000.00	17500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7000.00	17500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	24.70	24.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24.70	24.70

**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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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)  
**EMPIRE STATE PAC**

**A. REPUBLICAN MAINSTREET PARTNERSHIP PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
 SUITE 320  
 City WASHINGTON State DC Zip Code 20007  
 FEC ID number of contributing federal political committee. **C** C00165159  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 11 / 2018**  
**Transaction ID : SA11C.4147**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. TUESDAY GROUP POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 610 S. BOULEVARD  
 City TAMPA State FL Zip Code 33606  
 FEC ID number of contributing federal political committee. **C** C00433060  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **07 / 24 / 2018**  
**Transaction ID : SA11C.4153**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. TUESDAY GROUP POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 610 S. BOULEVARD  
 City TAMPA State FL Zip Code 33606  
 FEC ID number of contributing federal political committee. **C** C00433060  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 30 / 2018**  
**Transaction ID : SA11C.4146**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	7000.00

**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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**EMPIRE STATE PAC**

**A. JOHN FASO VICTORY COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 98

City SOUTH SALEM	State NY	Zip Code 10590
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FEC ID number of contributing federal political committee. **C** C00633263

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9980.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		07		2018

**Transaction ID : SA12.4149**

Amount of Each Receipt this Period  
5000.00

Memo Item  
transfer from JFC

**B. Lauder, Ronald, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 767 5th Ave.  
Fl. 42

City New York	State NY	Zip Code 10153
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-employed	Occupation (for Individual) Businessman
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		28		2018

**Transaction ID : SA12.4150**

Amount of Each Receipt this Period  
5000.00

Memo Item  
transfer from JFC

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code

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

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 8 OF 16
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Molinaro for New York**

Mailing Address PO Box 4612

City Poughkeepsie	State NY	Zip Code 12602
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		07		2018

**Transaction ID : SA16.4152**

Amount of Each Receipt this Period  
1000.00

Memo Item  
refund of 6/27/2018 non-federal contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00



**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

**A. CARLOS CURBELO CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8724 SUNSET DR  
#355

M M M	/	D D D	/	Y Y Y Y Y
07		17		2018

City MIAMI State FL Zip Code 33173

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00546846
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4158

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. CATHY MCMORRIS RODGERS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address BOX 137

M M M	/	D D D	/	Y Y Y Y Y
09		09		2018

City SPOKANE State WA Zip Code 99210

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00390476
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4194

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: WA District: 05

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**C. CLAUDIA TENNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8469 SENECA TPKE  
STE 105

M M M	/	D D D	/	Y Y Y Y Y
07		04		2018

City NEW HARTFORD State NY Zip Code 13413

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00632828
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4157

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: NY District: 22

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

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

3000.00
---------

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

**A. COFFMAN FOR CONGRESS 2018**

Full Name (Last, First, Middle Initial)

Mailing Address 4950 S YOSEMITE STREET F2 #511

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: CO District: 06

Date of Disbursement

/  /

FEC Identification Number

**C** C00629287

**Transaction ID : SB23.4196**

Amount of Each Disbursement this Period

Memo Item

**B. COMSTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 831

City MC LEAN State VA Zip Code 22101

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: VA District: 10

Date of Disbursement

/  /

FEC Identification Number

**C** C00554261

**Transaction ID : SB23.4184**

Amount of Each Disbursement this Period

Memo Item

**C. DENHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: CA District: 10

Date of Disbursement

/  /

FEC Identification Number

**C** C00473272

**Transaction ID : SB23.4180**

Amount of Each Disbursement this Period

Memo Item

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

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

**A. FRIENDS OF DUSTY JOHNSON**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 278

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

City MITCHELL State SD Zip Code 57301

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00628917
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4176

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: SD District: 01

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. FRIENDS OF ERIK PAULSEN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
07		13		2018

City EDEN PRAIRIE State MN Zip Code 55344

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00439661
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4160

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: MN District: 03

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**C. FRIENDS OF S. ASHLEY NICKLOES**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 15

M M M	/	D D D	/	Y Y Y Y Y
07		24		2018

City ROCKFORD State TN Zip Code 37853

FEC Identification Number

Purpose of Disbursement  
campaign contribution

C	C00671206
---	-----------

Candidate Name

011
Category/ Type

Transaction ID : SB23.4168

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: TN District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

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

3000.00
---------

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

**A. JOHN CHRIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 1214 BROADWAY

City FOUNTAIN HILL State PA Zip Code 18015

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 08

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C** C00640839

**Transaction ID : SB23.4164**

Amount of Each Disbursement this Period

Memo Item

**B. LANCE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 999

City EDISON State NJ Zip Code 08818

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NJ District: 07

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**C** C00444224

**Transaction ID : SB23.4186**

Amount of Each Disbursement this Period

Memo Item

**C. MARIA ELVIRA SALAZAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 558033

City MIAMI State FL Zip Code 33255

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 27

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C** C00671859

**Transaction ID : SB23.4178**

Amount of Each Disbursement this Period

Memo Item

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

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

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

Full Name (Last, First, Middle Initial) <b>A. MARTY FOR CONGRESS INC</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2018
Mailing Address PO BOX 1		FEC Identification Number C00658583 <b>Transaction ID : SB23.4166</b> Amount of Each Disbursement this Period 500.00
City OREFIELD	State PA	Zip Code 18069
Purpose of Disbursement campaign contribution		011 Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 07	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. POLIQUIN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2018
Mailing Address PO BOX 50		FEC Identification Number C00518654 <b>Transaction ID : SB23.4162</b> Amount of Each Disbursement this Period 1000.00
City OAKLAND	State ME	Zip Code 04963
Purpose of Disbursement campaign contribution		011 Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ME District: 02	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. RODNEY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2018
Mailing Address PO BOX 344		FEC Identification Number C00521948 <b>Transaction ID : SB23.4188</b> Amount of Each Disbursement this Period 1000.00
City TAYLORVILLE	State IL	Zip Code 62568
Purpose of Disbursement campaign contribution		011 Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 13	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

**A. ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 435

City SEWICKLEY State PA Zip Code 15143

Purpose of Disbursement  
campaign contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 17

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 02 / 2018

FEC Identification Number

C C00497115

**Transaction ID : SB23.4172**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. SCOTT TAYLOR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement  
campaign contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: VA District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify)

011  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2018

FEC Identification Number

C C00608703

**Transaction ID : SB23.4190**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. TIFFANY SHEDD FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 2650 E SOUTHERN AVE

City MESA State AZ Zip Code 85204

Purpose of Disbursement  
campaign contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2018

FEC Identification Number

C C00657155

**Transaction ID : SB23.4170**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00



**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**EMPIRE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. YOUNG FOR IOWA, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2018

Mailing Address PO BOX 162

FEC Identification Number

**C** C00545616

City VAN METER State IA Zip Code 50261

**Transaction ID : SB23.4185**

Purpose of Disbursement  
campaign contribution

**011**  
Category/  
Type

Amount of Each Disbursement this Period

1000.00

Candidate Name

Memo Item

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IA District: 03

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Memo Item

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

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Memo Item

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

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

1000.00

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

21000.00