

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC CENTER  
2021 DEC -2 PM 1:00

Office Use Only

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

WYOMING COUNTY DEMOCRATIC COMMITTEE

ADDRESS (number and street) ▼

4879 OLD BUFFALO ROAD

Check if different than previously reported. (ACC)

WARSAW

NY

14569

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00532606

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on MM / DD / YYYY in the State of   

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on MM / DD / YYYY in the State of   

5. Covering Period MM / DD / YYYY 07 / 01 / 2021 through MM / DD / YYYY 09 / 30 / 2021

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 **SUZANNE M. COOGAN**

Signature of Treasurer

*Suzanne Coogan*

Date

MM / DD / YYYY 11 / 13 / 2021

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 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

---

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2021

To:

MM / DD / YYYY  
09 / 30 / 2021

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		8,488.87
(b) Cash on Hand at Beginning of Reporting Period.....	11,696.91	
(c) Total Receipts (from Line 19).....	3,912.03	7,790.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	15,608.94	16,279.80
7 Total Disbursements (from Line 31).....	3,737.24	4,408.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	11,871.70	11,871.70
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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**WYOMING COUNTY DEMOCRATIC COMMITTEE**

Report Covering the Period: From:

07 / 01 / 2021

To:

09 / 30 / 2021

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).....	3,222.03	3,222.03
(ii) Unitemized.....	690.00	690.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3,912.03	4,312.03
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		3,478.90
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3,912.03	7,790.93
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3,912.03	7,790.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶		

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. Disbursements</b>		<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share .....			
(ii) Non-Federal Share .....		3,737.24	4,408.10
(b) Other Federal Operating Expenditures .....			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		3,737.24	4,408.10
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....			
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)) ..		3,727.24	4,408.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....			

**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) .....	3,912.03	7,790.93
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3,912.03	7,790.93
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) .....	3,737.24	4,408.10

**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 11	
	<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			

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)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) A. <i>Appleton, Cynthia</i>		Date of Receipt <i>07 01 2021</i>
Mailing Address <i>126 Jefferson St</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Watson</i>	State Zip Code <i>NY 14569</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>100.00</i>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <i>100.00</i>	

Full Name (Last, First, Middle Initial) B. <i>Moran, Timothy</i>		Date of Receipt <i>07 01 2021</i>
Mailing Address <i>19 Lincoln Ave</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Attica</i>	State Zip Code <i>NY 14011</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>100.00</i>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <i>100.00</i>	

Full Name (Last, First, Middle Initial) C. <i>Morsan, Mary M.</i>		Date of Receipt <i>07 01 2021</i>
Mailing Address <i>53 Livingston St.</i>		Amount of Each Receipt this Period <i>75.00</i>
City <i>Watson</i>	State Zip Code <i>NY 14569</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Amount of Each Receipt this Period <i>75.00</i>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <i>75.00</i>	

SUBTOTAL of Receipts This Page (optional).....▶	<i>275.00</i>
TOTAL This Period (last page this line number only).....▶	

**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 2 OF 11	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) A. <i>Carter, George Ann</i>		Date of Receipt <i>07 01 2021</i>
Mailing Address <i>4436 Wilder Rd</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Warsaw</i>	State <i>NY</i>	
Zip Code <i>14569</i>		Name of Employer
FEC ID number of contributing federal political committee. <i>C</i>		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>100.00</i>		

Full Name (Last, First, Middle Initial) B. <i>Kirsch, Doris</i>		Date of Receipt <i>07 01 2021</i>
Mailing Address <i>3895 Bartz Rd</i>		Amount of Each Receipt this Period <i>200.00</i>
City <i>Stuykerville</i>	State <i>NY</i>	
Zip Code <i>14145</i>		Name of Employer
FEC ID number of contributing federal political committee. <i>C</i>		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>200.00</i>		

Full Name (Last, First, Middle Initial) C. <i>Skenshorn, Berita</i>		Date of Receipt <i>07 06 2021</i>
Mailing Address <i>PO Box 271</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Silver Springs</i>	State <i>NY</i>	
Zip Code <i>14550</i>		Name of Employer
FEC ID number of contributing federal political committee. <i>C</i>		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>100.00</i>		

SUBTOTAL of Receipts This Page (optional).....▶	<i>400.00</i>
TOTAL This Period (last page this line number only).....▶	

RECEIVED BY: GUY, GUY, CORPORATION

**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 3 OF 11	
	<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)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) A. <i>Lyons, Timothy</i>		Date of Receipt <i>07 06 2021</i>
Mailing Address <i>49 W Court St.</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Warsaw</i>	State <i>NY</i>	
Zip Code <i>14569</i>		FEC ID number of contributing federal political committee. <i>C</i>
Name of Employer		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>100.00</i>		

Full Name (Last, First, Middle Initial) B. <i>Himek, Jason</i>		Date of Receipt <i>07 06 2021</i>
Mailing Address <i>18 Churchview Ln.</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Pittsford</i>	State <i>NY</i>	
Zip Code <i>14534</i>		FEC ID number of contributing federal political committee. <i>C</i>
Name of Employer		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>100.00</i>		

Full Name (Last, First, Middle Initial) C. <i>Bush, Harold</i>		Date of Receipt <i>07 06 2021</i>
Mailing Address <i>PO Box 456</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Silver Springs</i>	State <i>NY</i>	
Zip Code <i>14550</i>		FEC ID number of contributing federal political committee. <i>C</i>
Name of Employer		
Occupation		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ <i>300.00</i>		

SUBTOTAL of Receipts This Page (optional).....▶	<i>300.00</i>
TOTAL This Period (last page this line number only).....▶	



**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 4 OF 11	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

**A. Friends of Mark Poloncarz**

Full Name (Last, First, Middle Initial)  
*Friends of Mark Poloncarz*

Mailing Address  
*PO Box 87*

City  
*Buffalo* State  
*NY* Zip Code  
*14201*

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*100.00*

Date of Receipt  
*07 06 2021*

Amount of Each Receipt this Period  
*100.00*

**B. Bannister, Kathleen**

Full Name (Last, First, Middle Initial)  
*Bannister, Kathleen*

Mailing Address  
*PO Box 331*

City  
*Genesville* State  
*NY* Zip Code  
*14066*

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*100.00*

Date of Receipt  
*07 06 2021*

Amount of Each Receipt this Period  
*100.00*

**C. Laborers Int. Union of NA Local 435**

Full Name (Last, First, Middle Initial)  
*Laborers Int. Union of NA Local 435*

Mailing Address  
*20 fourth St.*

City  
*Rochester* State  
*NY* Zip Code  
*14609*

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

Name of Employer  
Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*100.00*

Date of Receipt  
*07 06 2021*

Amount of Each Receipt this Period  
*100.00*

**SUBTOTAL** of Receipts This Page (optional).....▶ *300.00*

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

ACORN - NY - CDT - CDT - CONFIDENTIAL

**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 5 OF 11
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14
	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial)

A. *Steffen, Carol*

Mailing Address  
*3531 Telegraph Rd*

City *Bliss* State *NY* Zip Code *14024*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date *75.00*

Date of Receipt

*07 07 2021*

Amount of Each Receipt this Period

*75.00*

Full Name (Last, First, Middle Initial)

B. *King, Raymond*

Mailing Address  
*PO Box 152*

City *Silver Springs* State *NY* Zip Code *14550*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date *100.00*

Date of Receipt

*07 09 2021*

Amount of Each Receipt this Period

*100.00*

Full Name (Last, First, Middle Initial)

C. *Bush, Elizabeth*

Mailing Address  
*1217 Dale Rd*

City *Warsaw* State *NY* Zip Code *14569*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date *100.00*

Date of Receipt

*07 09 2021*

Amount of Each Receipt this Period

*200.00*

SUBTOTAL of Receipts This Page (optional).....	<i>375.00</i>
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE <u>6</u> OF <u>11</u>	
	<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)

Full Name (Last, First, Middle Initial) A. <u>Kreis, Kathleen</u>		Date of Receipt <u>07 09 2021</u>
Mailing Address <u>6216 Lava Lake Rd.</u>		Amount of Each Receipt this Period <u>100.00</u>
City <u>Arcade</u>	State <u>NY</u> Zip Code <u>14009</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>100.00</u>	

Full Name (Last, First, Middle Initial) B. <u>Rinehart, Gary</u>		Date of Receipt <u>07 13 2021</u>
Mailing Address <u>PO Box 220</u>		Amount of Each Receipt this Period <u>100.00</u>
City <u>Silver Springs</u>	State <u>NY</u> Zip Code <u>14550</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>100.00</u>	

Full Name (Last, First, Middle Initial) C. <u>Mc Nulty, Susan</u>		Date of Receipt <u>07 16 2021</u>
Mailing Address <u>1733 Rt 78</u>		Amount of Each Receipt this Period <u>75.00</u>
City <u>Lava Center</u>	State <u>NY</u> Zip Code <u>14082</u>	
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <u>75.00</u>	

SUBTOTAL of Receipts This Page (optional).....▶	<u>275.00</u>
TOTAL This Period (last page this line number only).....▶	

**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 <u>7</u> OF <u>11</u>	
	<input checked="" type="checkbox"/> 11a 13 <input type="checkbox"/> 11b 14 <input type="checkbox"/> 11c 15 <input type="checkbox"/> 12 16 <input type="checkbox"/> 17		

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

**A.** Full Name (Last, First, Middle Initial) *SMITH, E.A.*

Mailing Address *3493 E. Main St.*

City *Bliss* State *NY* Zip Code *14024*

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date *75.00*

Date of Receipt *07 20 2021*

Amount of Each Receipt this Period *75.00*

**B.** Full Name (Last, First, Middle Initial) *Gayford, Norman*

Mailing Address *40 Liberty St*

City *Warsaw* State *NY* Zip Code *14569*

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date *200.00*

Date of Receipt *07 26 2021*

Amount of Each Receipt this Period *200.00*

**C.** Full Name (Last, First, Middle Initial) *Norman, J.A.*

Mailing Address *PO Box 356*

City *Greenville* State *NY* Zip Code *14066*

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date *100.00*

Date of Receipt *07 26 2021*

Amount of Each Receipt this Period *100.00*

**SUBTOTAL** of Receipts This Page (optional) *375.00*

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

SECRETARY OF STATE

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

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) A. <i>Codman, Suzanne</i>		Date of Receipt <i>07 26 2021</i>
Mailing Address <i>4879 Old Buffalo Rd</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Warsaw</i>	State <i>NY</i>	
Zip Code <i>14569</i>		Amount of Each Receipt this Period <i>100.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <i>100.00</i>		

Full Name (Last, First, Middle Initial) B. <i>Jones, Carol</i>		Date of Receipt <i>07 26 2021</i>
Mailing Address <i>10 Sherman Ave.</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Arcade</i>	State <i>NY</i>	
Zip Code <i>14009</i>		Amount of Each Receipt this Period <i>100.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <i>100.00</i>		

Full Name (Last, First, Middle Initial) C. <i>Moran, Daniel</i>		Date of Receipt <i>07 28 2021</i>
Mailing Address <i>57 Geneva Street</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Warsaw</i>	State <i>NY</i>	
Zip Code <i>14569</i>		Amount of Each Receipt this Period <i>100.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <i>100.00</i>		

SUBTOTAL of Receipts This Page (optional).....▶	<i>300.00</i>
TOTAL This Period (last page this line number only).....▶	

RECEIVED BY: GUY, GUY, CONFIRMATION

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

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) A. <i>Staffehl, Carol</i>		Date of Receipt <i>07 30 2021</i>
Mailing Address <i>3531 Telegraph Rd</i>		Amount of Each Receipt this Period <i>75.00</i>
City <i>Bliss</i>	State Zip Code <i>NY 14024</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Aggregate Year-to-Date <i>150.00</i>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. <i>Brunner, Angela</i>		Date of Receipt <i>07 30 2021</i>
Mailing Address <i>1947 Chaffee Rd</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Arcebo</i>	State Zip Code <i>NY 14009</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Aggregate Year-to-Date
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. <i>Act Blue</i>		Date of Receipt <i>08 03 2021</i>
Mailing Address <i>PO Box 441146</i>		Amount of Each Receipt this Period <i>72.03</i>
City <i>Somerville</i>	State Zip Code <i>MA 02144</i>	
FEC ID number of contributing federal political committee. <i>C</i>		Aggregate Year-to-Date <i>72.03</i>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<i>247.03</i>
TOTAL This Period (last page this line number only).....	

**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 3 OF 11	
	<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)  
*Wyoming County Democratic Committee*

**A. *MacDonald, Jonathan***

Full Name (Last, First, Middle Initial)

Mailing Address  
*80 Limesee St.*

City  
*Warsaw* State  
*NY* Zip Code  
*14569*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*100.00*

Date of Receipt  
*08 03 2021*

Amount of Each Receipt this Period  
*100.00*

**B. *Flaherty, Linda***

Full Name (Last, First, Middle Initial)

Mailing Address  
*461 Brooklyn St.*

City  
*Warsaw* State  
*NY* Zip Code  
*14569*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
*100.00*

Date of Receipt  
*08 13 2021*

Amount of Each Receipt this Period  
*75.00*

**C. *SKILL, JOSEPH S***

Full Name (Last, First, Middle Initial)

Mailing Address  
*4142 Short St.*

City  
*Silver Springs* State  
*NY* Zip Code  
*14550*

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  
*09 04 2021*

Amount of Each Receipt this Period  
*100.00*

SUBTOTAL of Receipts This Page (optional) ..... *275.00*

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

RECEIVED FROM THE STATE OF NEW YORK

**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 1 OF 11	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
*Wyoming County Democratic Committee*

Full Name (Last, First, Middle Initial) <i>A. Almeter, Michael</i>		Date of Receipt <i>08 18 2021</i>
Mailing Address <i>29 29 Dutch Hollow Rd</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Strykersville</i>	State <i>NY</i>	
Zip Code <i>14145</i>		Amount of Each Receipt this Period <i>100.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period <i>100.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <i>100.00</i>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....	<i>100.00</i>
TOTAL This Period (last page this line number only).....	<i>3222.03</i>



**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 checked="" 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

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NAME OF COMMITTEE (In Full)  
**WYOMING COUNTY DEMOCRATIC COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. POSTMASTER**

Mailing Address  
**35 S. MAIN ST**

City **WARSAW** State **NY** Zip Code **14569**

Purpose of Disbursement  
**CERTIFIED POSTAGE TO FEC**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
07 02 2021

Amount of Each Disbursement this Period  
4.80

Category/Type

Full Name (Last, First, Middle Initial)

**B. WYOMING COUNTY FAIR ASSOCIATION**

Mailing Address  
**525 PERRY ROAD**

City **PAVILION** State **NY** Zip Code **14525**

Purpose of Disbursement  
**INSURANCE FEE**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
07 03 2021

Amount of Each Disbursement this Period  
75.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. CAROL STEFFEHL, TOWN OF EAGLE**

Mailing Address  
**3531 Telegraph Rd**

City **Bliss,** State **NY** Zip Code **14024**

Purpose of Disbursement  
**LOCAL ELECTION SUPPORT**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
07 30 2021

Amount of Each Disbursement this Period  
100.00

Category/Type

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

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

RECEIVED BY: GUY, OFF. CONFIDENTIAL

**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 checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
**WYOMING COUNTY DEMOCRATIC COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SUSAN MC NULTY, TOWN OF JAVA**

Date of Disbursement

Mailing Address  
**1733 Rt 78**

**07 / 02 / 2021**

City **Java Center** State **NY** Zip Code **14082**

Purpose of Disbursement  
**LOCAL ELECTION SUPPORT**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**1,400.00**

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

State: District:

Full Name (Last, First, Middle Initial)

**B. JUDY WHITE, TOWN OF ATTICA**

Date of Disbursement

Mailing Address  
**27 Stevens Drive**

**07 / 03 / 2021**

City **ATTICA** State **NY** Zip Code **14011**

Purpose of Disbursement  
**LOCAL ELECTION SUPPORT**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**1,200.00**

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

State: District:

Full Name (Last, First, Middle Initial)

**C. SUZANNE COOGAN, TOWN OF WARSAW**

Date of Disbursement

Mailing Address  
**4879 OLD BUFFALO RD**

**07 / 30 / 2021**

City **WARSAW** State **NY** Zip Code **14569**

Purpose of Disbursement  
**LOCAL ELECTION SUPPORT**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

**500.00**

Office Sought:  House  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).....▶

**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 <b>3</b> OF <b>3</b>					
	<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		

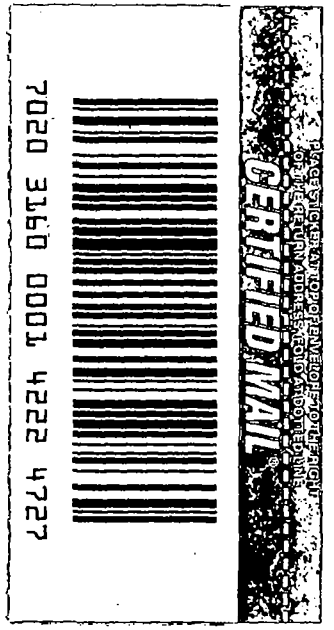
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NAME OF COMMITTEE (In Full)  
**WYOMING COUNTY DEMOCRATIC COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CYNTHIA APPLETON</b>		Date of Disbursement <b>08 / 10 / 2021</b>
Mailing Address <b>126 JEFFERSON ST</b>		Amount of Each Disbursement this Period <b>74.94</b>
City <b>WARSAW</b>	State <b>NY</b>	
Zip Code <b>14569</b>		Amount of Each Disbursement this Period <b>360.00</b>
Purpose of Disbursement <b>FAIR BOOTH EXPENSES</b>		
Candidate Name		Amount of Each Disbursement this Period <b>22.50</b>
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>B. WYOMING COUNTY FAIR ASSOCIATION</b>		Date of Disbursement <b>08 / 18 / 2021</b>
Mailing Address <b>525 PERRY ROAD</b>		Amount of Each Disbursement this Period <b>360.00</b>
City <b>PAVILION</b>	State <b>NY</b>	
Zip Code <b>14525</b>		Amount of Each Disbursement this Period <b>22.50</b>
Purpose of Disbursement <b>FAIR BOOTH 2022 RENT</b>		
Candidate Name		Amount of Each Disbursement this Period <b>22.50</b>
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>C. WARSAW PENNSAVER</b>		Date of Disbursement <b>09 / 06 / 2021</b>
Mailing Address <b>72 N. MAIN</b>		Amount of Each Disbursement this Period <b>22.50</b>
City <b>WARSAW</b>	State <b>NY</b>	
Zip Code <b>14569</b>		Amount of Each Disbursement this Period <b>22.50</b>
Purpose of Disbursement <b>PRINT ADS</b>		
Candidate Name		Amount of Each Disbursement this Period <b>22.50</b>
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).....▶	
TOTAL This Period (last page this line number only).....▶	

ZAVINE COUSIN, TRAS.  
DANIEL COUNTY DEMOCRATS  
005324016  
879 Old Bedford Rd.  
Dartmouth NY 14814



Federal Election Commission  
1050 First Street N.E.  
Washington, D.C. 20463

RECEIVED  
FEDERAL CENTER  
2021 DEC -2 PM 1:00

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 11/16/21
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	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

PJZ
12/3/21  
**PREPARER**
**DATE PREPARED**

REPORTING OFFICER'S SIGNATURE