

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

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| 1. NAME OF COMMITTEE IN FULL FRIENDS OF NAN HAYWORTH | | | |
| ADDRESS (number and street) P.O. BOX 511 | | | |
| CITY, STATE, and ZIP CODE CHESTER NY 10918 | | | |
| 2. NAME OF CANDIDATE NAN HAYWORTH | 3. OFFICE SOUGHT (State and District) House NY 18 | | 4. FEC IDENTIFICATION NUMBER C00466490 |
| 5. IS THIS AN AMENDMENT? <input type="checkbox"/> NO, THIS IS A NEW FILING <input checked="" type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON <u>10</u> / <u>26</u> / <u>2014</u> | | | |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer MIDDLETOWN MEDICAL, P.C. | | Date (month, day, year) 10/26/2014 | Amount 2500.00 |
| Transaction ID : F6.18645 | | | |
| Occupation PRESIDENT | | | |
| RAJAN GULATI 111 MALTESE DRIVE MIDDLETOWN NY 10940 | | | |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer WEISTEIN ENTERPRISES, INC. | | Date (month, day, year) 10/26/2014 | Amount 1000.00 |
| Transaction ID : F6.18644 | | | |
| Occupation PRESIDENT | | | |
| LLOYD J. SHULMAN ROCKRIDGE FARM 961, ROUTE 52 CARMEL NY 10512-4733 | | | |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer EYEPAC POLITICAL ACTION COMMITTEE FOR AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY | | Date (month, day, year) 10/26/2014 | Amount 2500.00 |
| Transaction ID : F6.18647 | | | |
| Occupation | | | |
| EYEPAC POLITICAL ACTION COMMITTEE FOR AMERICAN SOCIETY OF CATARACT AND REFRACTIVE SURGERY 4000 LEGATO ROAD, SUITE 700 FAIRFAX VA 22033 | | | |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer HELP UNITE REPUBLICANS TODAY POLITICAL ACTION COMMITTEE | | Date (month, day, year) 10/26/2014 | Amount 1000.00 |
| Transaction ID : F6.18649 | | | |
| Occupation | | | |
| HELP UNITE REPUBLICANS TODAY POLITICAL ACTION COMMITTEE PO BOX 283 CHATHAM VA 24531 | | | |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE | | | |
| Name of Employer | | Date (month, day, year) | Amount |
| Occupation | | | |
| SIGNATURE (optional) BRADLEY T. CRATE | | DATE 01/20/2015 | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |
| [Electronically Filed] | | | |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)