

**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

TENNEY FOR CONGRESS

ADDRESS (number and street)

28 ROBINSON ROAD

PO BOX 128



Check if different than previously reported. (ACC)

CLINTON

NY

13323

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00561183

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NY

22

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

01 / 01 / 2016

through

M M / D D / Y Y Y Y

03 / 31 / 2016

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

LOCKE, WILLIAM, F, ,

Type or Print Name of Treasurer

LOCKE, WILLIAM, F, ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07 / 14 / 2017

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 48

Write or Type Committee Name
TENNEY FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
 01 / 01 / 2016

To:

M M / D D / Y Y Y Y
 03 / 31 / 2016

	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))....	65567.00	99072.50
(b) Total Contribution Refunds (from Line 20(d))	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	65067.00	98572.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13628.70	15201.60
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	25.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	13628.70	15176.60
8. Cash on Hand at Close of Reporting Period (from Line 27)	136415.45	
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)	160000.00	

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

PAGE 3 / 48

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TENNEY FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

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).....**

49475.00

71975.00

(ii) Unitemized.....

9992.00

15997.50

(iii) TOTAL of contributions from individuals ▶

59467.00

87972.50

(b) Political Party Committees.....

0.00

0.00

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

6100.00

11100.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

65567.00

99072.50

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

50000.00

50000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

50000.00

50000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

25.00

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)..... ▶

115567.00

149097.50

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 48

II. DISBURSEMENTS**COLUMN A
Total This Period****COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

13628.70

15201.60

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

0.00

2000.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

2000.00

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)

500.00

500.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

500.00

500.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

14128.70

17701.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

34977.15

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

115567.00

25. SUBTOTAL (add Line 23 and Line 24).....

150544.15

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

14128.70

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

136415.45

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 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 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)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLEN, DAVID, S, MR,

Mailing Address 27 HOFFMAN RD

City NEW HARTFORD	State NY	Zip Code 13413
----------------------	-------------	-------------------

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

Name of Employer UTICA CUTLERY	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5122

Amount of Each Receipt this Period

750.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BICKFORD, MARION, E, ,

Mailing Address 4802 ORMOND DR

City CAZENOVIA	State NY	Zip Code 13035
-------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2016

Transaction ID : SA11AI.5301

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BOULTON, GAIL, , ,

Mailing Address 2100 BERKSHIRE PL

City GREENSBORO	State NC	Zip Code 27408
--------------------	-------------	-------------------

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

Name of Employer N/A	Occupation HOMEMAKER
-------------------------	-------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2016

Transaction ID : SA11AI.5399

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

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

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

3750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARBONE AUTOMOTIVE GROUP

Mailing Address 5194 COMMERCIAL DR

City
YORKVILLEState
NYZip Code
13495FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		17		2016

Transaction ID : SA11AI.5178

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CARBONE, ENESSE, M, ,

Mailing Address 5194 COMMERCIAL DR

City
YORKVILLEState
NYZip Code
13495FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		17		2016

Transaction ID : SA11AI.5178.0

Amount of Each Receipt this Period

500.00

☒ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CAVALLO, THOMAS, J, ,

Mailing Address 40 GENESEE ST

City
NEW HARTFORDState
NYZip Code
13413FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

RESTAURANT OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		28		2016

Transaction ID : SA11AI.5322

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

750.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.5178

SEE PARTNERSHIP ATTRIBUTION BELOW

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 48

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

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CIRUCCI, JOSEPH, A, ,

Mailing Address 4005 JUNIPER DR

City BETHLEHEM	State PA	Zip Code 18020
-------------------	-------------	-------------------

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

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 17 / 2016

Transaction ID : SA11AI.5469

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CLIFFORD, JAMES, G, ,

Mailing Address 110 BRIARWOOD CT

City NEW HARTFORD	State NY	Zip Code 13413
----------------------	-------------	-------------------

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

Name of Employer CLIFFORD FUEL CO.	Occupation BUSINESS OWNER
---------------------------------------	------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.5303

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COLLIS, JOHN, , ,

Mailing Address 34 CAPARDO DRIVE

City WHITESBORO	State NY	Zip Code 13492
--------------------	-------------	-------------------

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

Name of Employer FRED F. COLLIS & SONS	Occupation OWNER
---	---------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.5405

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

700.00

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 9 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

COSTELLO, JOHN, , ,

A.

Mailing Address 427 INDIES DRIVE

City

VERO BEACH

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 29 2016

Transaction ID : SA11AI.5384

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

D'AMICO, RUDY, , ,

B.

Mailing Address 6321 HIDDEN MEADOW DR

City

MARCY

State

NY

Zip Code

13403

FEC ID number of contributing
federal political committee.

C

Name of Employer

CABVI

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAHLIN, JOHN, M, ,

C.

Mailing Address 5495 HUNT RD

City

VERNON CENTER

State

NY

Zip Code

13477

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

1100.00

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 10 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DARLING, DONALD, C, ,
Mailing Address 180 SANFORD AVE

City State Zip Code
CLINTON NY 13323

FEC ID number of contributing
federal political committee.

C

Name of Employer
ORISKANY MFG TECH

Occupation
FINANCE ADMIN

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 22 2016

Transaction ID : SA11AI.5294

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DENGLER, NORBERT, , ,
Mailing Address 2758 MORRIS AVE

City State Zip Code
BRONX NY 10468

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
ATTY ASSET MGR

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11AI.5339

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOWDALL, PATRICK, W, ,
Mailing Address 9 GERALD ST

City State Zip Code
NORWICH NY 13815

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2016

Transaction ID : SA11AI.5316

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

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

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

3100.00

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 11 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

DUNLAP, ANNE, C, ,

A.

Mailing Address 1843 BROKEN BEND DR

City

WESTLAKE

State

TX

Zip Code

76262

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 04 2016

Transaction ID : SA11AI.5108

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

FALLON, SHEILA, MARY, ,

B.

Mailing Address 4775 ORMONDE DRIVE

City

CAZENOVIA

State

NY

Zip Code

13035

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 22 2016

Transaction ID : SA11AI.5285

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

FARNACH, JOSEPH, , ,

C.

Mailing Address 1208 MAIN STREET

City

SYLVAN BEACH

State

NY

Zip Code

13157

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
BUSINESS OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 09 2016

Transaction ID : SA11AI.5445

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 12 OF 48
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial) FARNSWORTH, DAVID, GEORGE, ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 24 / 2016	
Mailing Address 2945 MAIN ST PO BOX 16			Transaction ID : SA11AI.5439	
City MCCONNELLSVILLE	State NY	Zip Code 13401	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			Memo Item CONTRIBUTION	
Name of Employer HARVEST AMERICAN, INC.		Occupation SOFTWARE DEVELOPER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) GIOTTO, KRISTINE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 3823 MOHAWK STREET			Transaction ID : SA11AI.5358	
City NEW HARTFORD	State NY	Zip Code 13413	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Memo Item CONTRIBUTION	
Name of Employer FIBER INSTRUMENT SALES		Occupation DIRECTOR		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) GOMEZ, JOHN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2016	
Mailing Address 850 MONTAUK HWY, SUITE 44			Transaction ID : SA11AI.5436	
City BAYPORT	State NY	Zip Code 11705	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			Memo Item CONTRIBUTION	
Name of Employer EASTERN FIELD SERVICES		Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

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

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

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 13 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRIFFITHS, RONALD, , MR., JR

A.

Mailing Address 812 STONEHENGE DR

City

VESTAL

State

NY

Zip Code

13850

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOCKHEED-MARTIN

Occupation

CHIEF ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2016

Transaction ID : SA11AI.5320

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HAIDER, NAMEER, , ,

B.

Mailing Address 1508 GENESEE ST

City

UTICA

State

NY

Zip Code

13502

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2016

Transaction ID : SA11AI.5330

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HALL, MARK, , ,

C.

Mailing Address 28 YOUNGS RD

City

STAR LAKE

State

NY

Zip Code

13690

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN OF FINE

Occupation

WATER SUPERINTENDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2016

Transaction ID : SA11AI.5413

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

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

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HEANEY, ANDREW, , ,

Mailing Address 2 BONTECOU ROAD

City

MILLBROOK

State

NY

Zip Code

12545

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEANEY ENERGY CORP.

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

KLINE, WILLIAM, , ,

Mailing Address 88 INDIAN MOUND DR

City

WHITESBORO

State

NY

Zip Code

13492

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADIRONDACK FINANCIAL SERVICES

Occupation

INVESTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	6

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

KONDZIOWALA, THEODORE, , ,

Mailing Address INFORMATION REQUESTED

City

INFO REQUEST

State

ZZ

Zip Code

99999

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

Transaction ID : SA11AI.5337

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

KOZIARZ, WALTER, ALAN, ,

Mailing Address 7311 CANTERBURY HILL ROAD

City
ROMEState
NYZip Code
13440FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	6

Transaction ID : SA11AI.5459

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARKETOS, GERALD, L, ,

Mailing Address P.O. BOX 10

City
ROMEState
NYZip Code
13442FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	6

Transaction ID : SA11AI.5298

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MATT, LILLIAN, D, ,

Mailing Address 130 PARIS RD

City
NEW HARTFORDState
NYZip Code
13413FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	6

Transaction ID : SA11AI.5181

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

3250.00

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

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 16 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCGREW, MICHAEL, N, ,

A. Mailing Address 4777 LIMBERLOST LN

City
MANLIUS

State
NY

Zip Code
13104

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5132

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MCGREW, MICHAEL, N, ,

B. Mailing Address 4777 LIMBERLOST LN

City
MANLIUS

State
NY

Zip Code
13104

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 22 2016

Transaction ID : SA11AI.5281

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MEI, CARIN, , ,

C. Mailing Address 1224 PLEASANT STREET

City
UTICA

State
NY

Zip Code
13501

FEC ID number of contributing
federal political committee.

C

Name of Employer
162 WEST 84TH ST CORP

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11AI.5366

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

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

1500.00

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 17 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MONTECALVO, FRANK, , ,

A. Mailing Address 202 COMENALE CRESCENT

City

NEW YORK MILLS

State

NY

Zip Code

13417

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5126

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MONTECALVO, MARIANNE, , ,

Mailing Address 202 COMENALE CRESCENT

City

NEW YORK MILLS

State

NY

Zip Code

13417

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5128

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MOOTZ, JOSEPH, M, ,

Mailing Address 7 LINDALE AVE

City

NEW HARTFORD

State

NY

Zip Code

13413

FEC ID number of contributing
federal political committee.

C

Name of Employer

UTICA CITY SCHOOL DISTRICT

Occupation

TEACHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11AI.5369

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

1100.00

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 18 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MOWRY, JOHN, MICHAEL, ,
Mailing Address PO BOX 310

City State Zip Code
MEXICO NY 13114

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
ATTORNEY

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 27 2016

Transaction ID : SA11AI.5117

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
O'SHAUGHNESSY, SUSAN, , ,
Mailing Address 307 WALNUT ST

City State Zip Code
ROME NY 13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
REVERE COPPER

Occupation
CEO

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11AI.5335

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAGE, JAMES, H, ,
Mailing Address 6042 SLEEPY HOLLOW RD

City State Zip Code
ROME NY 13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 20 2016

Transaction ID : SA11AI.5441

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

3150.00

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

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

FOR LINE NUMBER: PAGE 19 OF 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

PAGE, JAMES, H, ,

A. Mailing Address 6042 SLEEPY HOLLOW RD

City
ROME

State
NY

Zip Code
13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 22 2016

Transaction ID : SA11AI.5411

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAGE, JAMES, H, ,

B. Mailing Address 6042 SLEEPY HOLLOW RD

City
ROME

State
NY

Zip Code
13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2016

Transaction ID : SA11AI.5306

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PALADINO, CARL, P, ,

C. Mailing Address 295 MAIN ST RM 210

City
BUFFALO

State
NY

Zip Code
14203

FEC ID number of contributing
federal political committee.

C

Name of Employer
PALADINO CAVAN QUILIVAN & PIERCE

Occupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 18 2016

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period

2700.00

☐ Memo Item
CONTRIBUTION

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

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

3100.00

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 20 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PARKER, MICHAEL, , ,

Mailing Address 7 INDIAN MOUND DR

City WHITESBORO	State NY	Zip Code 13492
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 16 2016

Transaction ID : SA11AI.5470

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PARKER, MICHAEL, , ,

Mailing Address 7 INDIAN MOUND DR

City WHITESBORO	State NY	Zip Code 13492
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 20 2016

Transaction ID : SA11AI.5440

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
POTOCKI, RODGER, P, MR.,

Mailing Address 1335 GRAFFENBURG RD

City NEW HARTFORD	State NY	Zip Code 13413
----------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

450.00

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 21 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

POTOCKI, RODGER, P, MR.,

Mailing Address 1335 GRAFFENBURG RD

City

NEW HARTFORD

State

NY

Zip Code

13413

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 03 2016

Transaction ID : SA11AI.5237

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

POTOCKI, RODGER, P, MR.,

Mailing Address 1335 GRAFFENBURG RD

City

NEW HARTFORD

State

NY

Zip Code

13413

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 22 2016

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PRIORE, JOSEPH, A, ,

Mailing Address 316 ONTARIO ST

City

UTICA

State

NY

Zip Code

13501

FEC ID number of contributing
federal political committee.

C

Name of Employer

PRIORE CONSTRUCTION

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2016

Transaction ID : SA11AI.5318

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

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

1350.00

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 22 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

REID, PAUL, D, ,

Mailing Address 11 HARDING AVE

City
LOCKPORT

State
NY

Zip Code
14094

FEC ID number of contributing
federal political committee.

C

Name of Employer
REID GROUP

Occupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 27 2016

Transaction ID : SA11AI.5390

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROMANO, F, EUGENE, ,

Mailing Address 501 MAIN ST

City
UTICA

State
NY

Zip Code
13501

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACEMAKER-MILLAR STEEL & INDUSTRIAL

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2016

Transaction ID : SA11AI.5183

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROMANO, F, EUGENE, ,

Mailing Address 501 MAIN ST

City
UTICA

State
NY

Zip Code
13501

FEC ID number of contributing
federal political committee.

C

Name of Employer
PACEMAKER-MILLAR STEEL & INDUSTRIAL

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2016

Transaction ID : SA11AI.5192

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

1000.00

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 23 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROMANO, LINDA, E.,

Mailing Address 501 MAIN ST

City UTICA	State NY	Zip Code 13501
---------------	-------------	-------------------

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

Name of Employer BOND SCHNOEK & KING	Occupation ATTORNEY
---	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROTHMAN, ROBERT,

Mailing Address P. O. BOX 173559

City TAMPA	State FL	Zip Code 33672
---------------	-------------	-------------------

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

Name of Employer BLACK DIAMOND GROUP	Occupation INVESTMENTS
---	---------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.5367

Amount of Each Receipt this Period

2650.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SACCO, JAMES, , MR,

Mailing Address 2305 HEMLOCK LN

City VESTAL	State NY	Zip Code 13850
----------------	-------------	-------------------

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

Name of Employer SELF	Occupation ATTORNEY
--------------------------	------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2016

Transaction ID : SA11AI.5224

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

3700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SACCO, JAMES, , MR,

Mailing Address 2305 HEMLOCK LN

City
VESTALState
NYZip Code
13850FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		22		2016

Transaction ID : SA11AI.5410

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. SCALZO, GARY, , ,

Mailing Address 10 WOODSTREAM CT.

City
NEW HARTFORDState
NYZip Code
13413FEC ID number of contributing
federal political committee.

C

Name of Employer
SCALZO, ZOGBY & WITTIG, INC.Occupation
INSURANCE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		25		2016

Transaction ID : SA11AI.5407

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. SHAHEEN, NANCY, A, DR.,

Mailing Address 5 SYLVAN GLEN RD

City
UTICAState
NYZip Code
13501FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
RADIOLOGIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		05		2016

Transaction ID : SA11AI.5125

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

775.00

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 25 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHAikh, JAWAD, F, ,

A.

Mailing Address 24 OAKWOOD DR

City

NEW HARTFORD

State

NY

Zip Code

13413

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2016

Transaction ID : SA11AI.5341

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SILVERNAIL, ROBERT, , ,

B.

Mailing Address 10 HERTFORD

City

NEWPORT COAST

State

CA

Zip Code

92657

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUTCHISON ROAD PARTNERS, LLC

Occupation

INVESTMENT MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 29 2016

Transaction ID : SA11AI.5437

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SINGLETON, JOHN, , ,

C.

Mailing Address 901 SKINNER DR. #583

City

SYLVAN BEACH

State

NY

Zip Code

13157

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN OF VIENNA

Occupation

CONSTABLE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2016

Transaction ID : SA11AI.5423

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

1250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

SINGLETON, JOHN, , ,**A.**

Mailing Address 901 SKINNER DR. #583

City

SYLVAN BEACH

State

NY

Zip Code

13157

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN OF VIENNA

Occupation

CONSTABLE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3			3		2	0	1	6

Transaction ID : SA11AI.5373

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

SMITH, JOE, , ,**B.**

Mailing Address 3414 ONEIDA ST

City

CHADWICKS

State

NY

Zip Code

13319

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3			2	8	2	0	1	6

Transaction ID : SA11AI.5385

Amount of Each Receipt this Period

300.00

☐ Memo Item
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

STONE, JOHN, G, ,**C.**

Mailing Address 4964 ADAH DR

City

MANLIUS

State

NY

Zip Code

13104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NY UNIFIED COURT SYSTEM

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3			1	6	2	0	1	6

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.**STONE, JOHN, G, ,**

Mailing Address 4964 ADAH DR

City

MANLIUS

State

NY

Zip Code

13104

FEC ID number of contributing
federal political committee.

C

Name of Employer

NY UNIFIED COURT SYSTEM

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	6

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION
B.

Full Name (Last, First, Middle Initial)

TARDUGNO, DOUGLAS, J, ,

Mailing Address 502 WEST CEDAR STREET

City

ROME

State

NY

Zip Code

13440

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	6

Transaction ID : SA11AI.5279

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION
C.

Full Name (Last, First, Middle Initial)

TARDUGNO, SCOTT, T, ,

Mailing Address 702 N WASHINGTON ST

City

ROME

State

NY

Zip Code

13440

FEC ID number of contributing
federal political committee.

C

Name of Employer

TARDUGNO DENTAL OFFICE

Occupation

DENTIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	6

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period

200.00

☐ Memo Item
 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 48

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

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

TENNEY, ROBERT, W, ,**A.** Mailing Address 476 STATE HIGHWAY 12B

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer

MID YORK PRESS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	6

Transaction ID : SA11AI.5213

Amount of Each Receipt this Period

3000.00

☐ Memo Item
 CONTRIBUTION
B. Full Name (Last, First, Middle Initial)
TENNEY, ROBERT, W, ,
Mailing Address 476 STATE HIGHWAY 12B

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer

MID YORK PRESS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	6

Transaction ID : SA11AI.5214

Amount of Each Receipt this Period

400.00

☐ Memo Item
 CONTRIBUTION
C. Full Name (Last, First, Middle Initial)
TENNEY, ROBERT, W, ,
Mailing Address 476 STATE HIGHWAY 12B

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer

MID YORK PRESS

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	6

Transaction ID : SA11AI.6311

Amount of Each Receipt this Period

- 2700.00

☒ Memo Item
 Redesignate: CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶

3400.00

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

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 29 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

TENNEY, ROBERT, W, ,

A. Mailing Address 476 STATE HIGHWAY 12B

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer
MID YORK PRESS

Occupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
04 22 2016

Transaction ID : SA11AI.6312

Amount of Each Receipt this Period

2700.00

☒ Memo Item
Redesignate: TO GENERAL

Full Name (Last, First, Middle Initial)

TENNEY, ROSEMARIE, L, ,

B. Mailing Address PO BOX 453

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
02 23 2016

Transaction ID : SA11AI.5212

Amount of Each Receipt this Period

5400.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

TENNEY, ROSEMARIE, L, ,

C. Mailing Address PO BOX 453

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
04 22 2016

Transaction ID : SA11AI.6314

Amount of Each Receipt this Period

- 2700.00

☒ Memo Item
Redesignate: CONTRIBUTION

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

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

5400.00

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 30 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

TENNEY, ROSEMARIE, L, ,

A.

Mailing Address PO BOX 453

City

SHERBURNE

State

NY

Zip Code

13460

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
04 22 2016

Transaction ID : SA11AI.6315

Amount of Each Receipt this Period

2700.00

☒ Memo Item
Redesignate: TO GENERAL

Full Name (Last, First, Middle Initial)

TURNER, SCOTT, , ,

B.

Mailing Address 3455 ELMWOOD AVENUE

City

ROCHESTER

State

NY

Zip Code

14610

FEC ID number of contributing
federal political committee.

C

Name of Employer

NIXON PEABODY LLP

Occupation

LAW FIRM PARTNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2016

Transaction ID : SA11AI.5433

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

WADE, JOHN, W, ,

C.

Mailing Address 151 NORTH GENESEE ST

City

UTICA

State

NY

Zip Code

13502

FEC ID number of contributing
federal political committee.

C

Name of Employer

DELMONICO'S

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
03 30 2016

Transaction ID : SA11AI.5332

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

500.00

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 31 OF 48

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WANDOVER, SUSAN, J, ,
Mailing Address 498 HINCKLEY RD

City State Zip Code
REMSEN NY 13438

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 05 2016

Transaction ID : SA11AI.5123

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILSON, JOHN, R, ,
Mailing Address 5740 LAKE ISLAND DR NW

City State Zip Code
ATLANTA GA 30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 24 2016

Transaction ID : SA11AI.5409

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

☐ Memo Item

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

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

1000.00

49475.00

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 32 OF 48

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CATHOLICS-COUNT FEDERAL

A.

Mailing Address 3 BELLFLOWER RD

City

BALLSTON SPA

State

NY

Zip Code

12020

FEC ID number of contributing
federal political committee.

C C00572313

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 03 2016

Transaction ID : SA11C.5234

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDUCATIONAL FUND

B.

Mailing Address P.O. BOX 458

City

W SAND LAKE

State

NY

Zip Code

12169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2016

Transaction ID : SA11C.5180

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SUSAN B ANTHONY LIST INC. CANDIDATE FUND

C.

Mailing Address 1707 L STREET, NW
SUITE 750

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 25 2016

Transaction ID : SA11C.5296

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

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

6000.00

6000.00

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 33 OF 48

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
TENNEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) TENNEY, CLAUDIA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 23 / 2016	
Mailing Address 12 SLAYTONBUSH LANE			Transaction ID : SA13A.5510	
City UTICA	State NY	Zip Code 13501	Amount of Each Receipt this Period 50000.00	
FEC ID number of contributing federal political committee. C H4NY22051			<input type="checkbox"/> Memo Item CANDIDATE LOAN FROM PERSONAL FUNDS	
Name of Employer N/A		Occupation CANDIDATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 50000.00		

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

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

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	50000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

297.14

Transaction ID : SB17.5502

☐ Memo Item**B. ANEDOT**Mailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

76.77

Transaction ID : SB17.5503

☐ Memo Item**C. ANEDOT**Mailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

19.76

Transaction ID : SB17.5504

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

393.67

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 PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	24	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

99.97

Transaction ID : SB17.5505

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	28	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

127.37

Transaction ID : SB17.5506

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	30	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

182.70

Transaction ID : SB17.5507

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

410.04

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

22.05

Transaction ID : SB17.5508

☐ Memo Item**B. ANEDOT**Mailing Address 5555 HILTON AVE
STE 106City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : SB17.5509

☐ Memo Item**C. AQUA VINO**

Mailing Address 16 HARBOR LOCK RD

City
UTICAState
NYZip Code
13502Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1037.97

Transaction ID : SB17.5478

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1096.02

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 PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BROTHERS 2

Mailing Address 2901 WATSON BLVD

City
ENDWELLState
NYZip Code
13760Purpose of Disbursement
CATERING/FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

810.00

Transaction ID : SB17.5482

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST CLASS PROMOTIONS

Mailing Address 1 N END AVENUE

City
NEW YORKState
NYZip Code
10282Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

645.00

Transaction ID : SB17.5493

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NY STATE CONSERVATIVE PARTY CONFERENCE ACCT

Mailing Address 325 PARKVIEW DR

City
SCHENECTADYState
NYZip Code
12303Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5476

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2455.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PRESTO PRINT

Mailing Address 5168 COMMERCIAL DR #1

City
YORKVILLEState
NYZip Code
13495Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

254.20

Transaction ID : SB17.5480

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL MEDIA SERVICES INCMailing Address 215 LELAND AVE STE 102
STE 1600City
UTICAState
NYZip Code
13502Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.5501

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SORENSON, JESSICA, , ,

Mailing Address 9 FAIRBANK S ST

City
AUGUSTAState
MEZip Code
04330Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5484

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3554.20

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 PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SORENSON, JESSICA, , ,

Mailing Address 9 FAIRBANK S ST

City
AUGUSTAState
MEZip Code
04330Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5486

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SORENSON, JESSICA, , ,

Mailing Address 9 FAIRBANK S ST

City
AUGUSTAState
MEZip Code
04330Purpose of Disbursement
TRAVEL - MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

71.66

Transaction ID : SB17.5487

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALLACE, LESLIE, , ,

Mailing Address 507 YATES ST

City
ALBANYState
NYZip Code
12208Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5494

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5071.66

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 PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 48

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WALLACE, LESLIE, , ,

Mailing Address 507 YATES ST

City
ALBANYState
NYZip Code
12208Purpose of Disbursement
TRAVEL - MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

278.00

Transaction ID : SB17.5496

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

278.00

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

13258.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 48

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TENNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. EDUCATIONAL FUND

Mailing Address P.O. BOX 458

Date of Disbursement

M M	D D	Y Y Y Y
02	22	2016

City
W SAND LAKEState
NYZip Code
12169Purpose of Disbursement
CONTRIBUTION REFUNDCategory/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB20C.5492

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

500.00

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

500.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 42 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4484

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

TENNEY, CLAUDIA, , ,

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

9000.00

Balance Outstanding at Close of This Period

41000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 04 M

D 01 D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

41000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 43 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4483

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

TENNEY, CLAUDIA, , ,

☐ Memo Item

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

40000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 04 M

D 25 D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

40000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 44 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4482

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2014

TENNEY, CLAUDIA, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 05 M

D 30 D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 45 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4721

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

TENNEY, CLAUDIA, , ,

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 20 D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 46 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4860

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2014

TENNEY, CLAUDIA, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M 07^MD 11^D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4864

TENNEY FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2014

TENNEY, CLAUDIA, , ,☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☐ Personal Funds of the Candidate

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 07^MD 23^D

Y 2014 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 48 OF 48

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5510

TENNEY FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

TENNEY, CLAUDIA, , ,

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

12 SLAYTONBUSH LANE

City

UTICA

State

NY

ZIP Code

13501

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 02 M

D 23 D

Y 2016 Y

M M

D D

ON DEMAND

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50000.00

TOTALS This Period (last page in this line only).....▶

160000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.