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## 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.

NAME OF COMMITTEE IN FULL     Friends of Julian Schreibi	man					
ADDRESS (number and street) PO Box 3151						
CITY, STATE, and ZIP CODE						
Kingston			NY 1240	02		
2. NAME OF CANDIDATE Julian Schreibman		3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER		
		House	NY 19	C00513739		
5. ISTHIS AN AMENDMENT? NO, THIS I	S A NEW FILI	NG	YES, IT AMENDS THE	NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month,	Amount
Eli Basch			Basch & Keegan		day, year)	
181 North Manor Avenue					10/26/2012	1300.00
181 North Marior Avenue			Transaction ID : C6	5701218		
			Occupation		-	
Kingston	NY	12401	Attorney			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
David Beaton			Maverick Capital		day, your)	
167 Millard Ave					10/26/2012	2000.00
107 William Ave			Transaction ID : C6700819			
Classy Hallan	<b>N</b> 10.4	10504 1105	Occupation			
Sleepy Hollow	NY	10591-1425	Analyst			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month, day, year)	Amount
Roy Carlin			Carlin Law Offices			
R.D. #1 Berme Rd					10/26/2012	1000.00
P.O. Pox 293E			Transaction ID : C6	<b>6701165</b>		
High Falls	NY	12440	Occupation Attorney			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer		Date (month,	Amount
Roy Carlin			Carlin Law Offices		day, year)	
•					10/26/2012	30.00
R.D. #1 Berme Rd						
P.O. Pox 293E			Transaction ID : C6 Occupation	5703100	_	
High Falls	NY	12440	Attorney			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount	
AMERICAN POSTAL WORKERS UNION AFL-CIO		American Postal Workers Union, AFL-		day, year)		
4200 L CT N.W.			CIO		10/26/2012	2500.00
1300 L ST N W			Transaction ID : C6	3701255		
			Occupation Occupation		-	
WASHINGTON	DC	20005	Legislative and Pol	itical Director		
SIGNATURE (optional) Christopher P Ragucci			DATE 10/30/2012			information contact:
Christopher P Kagucci		[Electronically Filed]	70/00/2012	Federal Election Commission 999 E Street, NW, Washington, DC 20463		
				Toll Free 800-424-9530, Local 202-694-1100		



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.



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NAME OF COMMITTEE IN FULL     Friends of Julian Schreibmanner			7	
ADDRESS (number and street) PO Box 3151	-			
. 6 26. 6 . 6 .				
CITY, STATE, and ZIP CODE			oontinustion	, naga
Kingston		NY 12402	continuation	i page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	NUMBER
Julian Schreibman		House NY 19	C00513739	
5. IS THIS AN AMENDMENT? NO, THIS IS	A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Mr. Joseph Patt		683 Capital Management, LLC	day, year)	
·			10/26/2012	1000.00
230 West 78th Street, #4A		Transaction ID - 00704450		
		Transaction ID : C6701158  Occupation	_	
New York	NY 10024	Trading		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Friends of Rosa DeLauro			day, year)	
Thends of Rosa Belauto			10/26/2012	1000.00
12 Trumbull St.				
2nd Fl		Transaction ID : C6701287		
New Haven	CT 06511	Occupation		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
Victoria Sanders		Self Employed	day, year)	
Victoria Sariders		Sell Employed	10/26/2012	2000.00
430 Buck Rd			10/20/2012	2000.00
		Transaction ID : C6703112		
0. 5:1	10101 5510	Occupation		
Stone Ridge	NY 12484-5518	Literary Agent		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
			,, ,,	
		Occupation		
		Cooupailon		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
			day, year)	
		Occupation		