

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER
2008 MAY 23 AM 11:39

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Coalition to Save Albany

ADDRESS (number and street) 212 Schoolhouse Rd

Check if different than previously reported. (ACC) Albany NY 12203

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00443929

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
 Election on _____ in the State of _____

(d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)
 Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 04 30 2008

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

Type or Print Name of Treasurer ANTON KONEV

Signature of Treasurer *Anton Konev* Date 05 20 2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X**
(Rev. 12/2004)

28039734484

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Coalition to Save Albany

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	W	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

2803973485

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td></tr></table>	Y	Y	Y	2	0	0	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y								
2	0	0								
0.00										
0.00										
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>-101.33</td></tr></table>	-101.33								
-101.33										
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>2667.00</td></tr></table>	2667.00	<table border="1" style="width: 100%;"><tr><td>19814.92</td></tr></table>	19814.92						
2667.00										
19814.92										
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td>2565.67</td></tr></table>	2565.67	<table border="1" style="width: 100%;"><tr><td>19814.92</td></tr></table>	19814.92						
2565.67										
19814.92										
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>2297.59</td></tr></table>	2297.59	<table border="1" style="width: 100%;"><tr><td>19546.84</td></tr></table>	19546.84						
2297.59										
19546.84										
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>268.08</td></tr></table>	268.08	<table border="1" style="width: 100%;"><tr><td>268.08</td></tr></table>	268.08						
268.08										
268.08										
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00								
0.00										
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00								
0.00										

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Coalition to Save Albany

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	W	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

28039734486

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	865.00	9309.92
(ii) Unitemized	1802.00	10505.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	2667.00	19814.92
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	2667.00	19814.92
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2667.00	19814.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2667.00	19814.92

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	2297.59	19546.84
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2297.59	19546.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2297.59	19546.84

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2667.00	19814.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2667.00	19814.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Coalition to Save Albany

A. Full Name (Last, First, Middle Initial) fundraiser
 Mailing Address
 City State Zip Code
 Date of Receipt: 04 / 02 / 2008
 Transaction ID: SA11AI.4603
 Amount of Each Receipt this Period: 90.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 5688.38

B. Full Name (Last, First, Middle Initial) fundraiser
 Mailing Address
 City State Zip Code
 Date of Receipt: 04 / 07 / 2008
 Transaction ID: SA11AI.4591
 Amount of Each Receipt this Period: 45.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 5733.38

C. Full Name (Last, First, Middle Initial) fundraiser
 Mailing Address
 City State Zip Code
 Date of Receipt: 04 / 15 / 2008
 Transaction ID: SA11AI.4628
 Amount of Each Receipt this Period: 240.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 5973.38

SUBTOTAL of Receipts This Page (optional) 375.00
 TOTAL This Period (last page this line number only)

28039734489

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

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

FOR LINE NUMBER: PAGE 7 / 10
(check only one)

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

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NAME OF COMMITTEE (In Full)
Coalition to Save Albany

A.

Full Name (Last, First, Middle Initial)
fundraiser

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Mailing Address

Transaction ID: SA11AI.4631

City State Zip Code

Amount of Each Receipt this Period
30.00

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6003.38

B.

Full Name (Last, First, Middle Initial)
Elliott Masie

Date of Receipt
MM / DD / YYYY
04 / 22 / 2008

Mailing Address PO Box 397

Transaction ID: SA11AI.4588

City State Zip Code
Saratoga Springs NY 12866

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation
businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

C.

Full Name (Last, First, Middle Initial)
Marsha Mortimore

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Mailing Address 13 Old Fort Ave

Transaction ID: SA11AI.4621

City State Zip Code
Schenectady NY 12306-1121

Amount of Each Receipt this Period
60.00

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

SUBTOTAL of Receipts This Page (optional) 340.00

TOTAL This Period (last page this line number only)

28039734490

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 10	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Coalition to Save Albany

A.	Full Name (Last, First, Middle Initial) Carol Olszewski	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address	Transaction ID: SA11AI.4568
	City State Zip Code	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
B.	Full Name (Last, First, Middle Initial) Ray Warner	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 33 Milner Ave	Transaction ID: SA11AI.4620
	City State Zip Code Albany NY 12203-2021	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00

28039734491

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	865.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Coalition to Save Albany	FEC IDENTIFICATION NUMBER C C00443929
---	---

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee
William Boyce

Mailing Address
92 Lexington Ave

City Albany State NY Zip Code 12206

Purpose of Expenditure _____ Category/Type _____

Name of Federal Candidate supported or Opposed by expenditure: _____

Calendar Year-To-Date Per Election for Office Sought 12729.94

Date 04 / 22 / 2008

Amount 670.00

Transaction ID: SE.4635

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
FedEx Kinko's

Mailing Address
110 Wolf Rd

City Albany State NY Zip Code 12205

Purpose of Expenditure _____ Category/Type _____

Name of Federal Candidate supported or Opposed by expenditure: _____

Calendar Year-To-Date Per Election for Office Sought 12759.94

Date 04 / 30 / 2008

Amount 30.00

Transaction ID: SE.4632

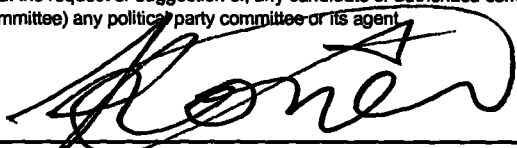
Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	700.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.


Signature _____

Date 05 / 20 / 2008

28039734492

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Coalition to Save Albany	FEC IDENTIFICATION NUMBER C C00443929
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Time Warner Cable

Mailing Address
1021 Highbridge Road

City Schenectady State NY Zip Code 12303

Purpose of Expenditure Category/Type

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought 12059.94

Date **MM** / **DD** / **YYYY**
04 / 01 / 2008

Amount 547.69

Transaction ID: SE.4633

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Verizon

Mailing Address
PO Box 15124

City Albany State NY Zip Code 12206-3019

Purpose of Expenditure Category/Type

Name of Federal Candidate supported or Opposed by expenditure:

Calendar Year-To-Date Per Election for Office Sought 11512.25

Date **MM** / **DD** / **YYYY**
04 / 01 / 2008

Amount 1049.90

Transaction ID: SE.4629

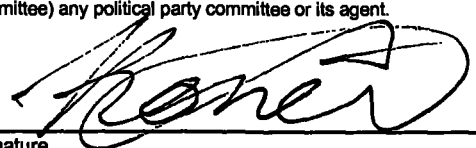
Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	1597.59
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2297.59

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

 _____
Signature

Date **MM** / **DD** / **YYYY**
05 / 20 / 2008

28039734493

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

28039734494

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input checked="" type="checkbox"/> USPS Express Mail	Postmarked <i>5/22/08</i>
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jms</i> PREPARER	<i>5/27/08</i> DATE PREPARED

(3/2005)