

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

Blakeman 2014 Inc.

ADDRESS (number and street) ▼

108 S. Franklin Avenue

Suite 1

Check if different than previously reported. (ACC)

Valley Stream

NY

11580

2. FEC IDENTIFICATION NUMBER ▼

C C00558189

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

04

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

through

M M /

D D /

Y Y Y Y

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 Vincent DeVito

Signature of Treasurer

Vincent DeVito

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Blakeman 2014 Inc.

Report Covering the Period: From: / / To: / /

	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))....	197903.00	544255.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	197903.00	544255.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	419644.82	856747.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	419644.82	856747.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	387507.64	
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).....	700000.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Blakeman 2014 Inc.

Report Covering the Period: From: / / To: / /

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).....	166525.00	484350.00
(ii) Unitemized.....	14878.00	42905.00
(iii) TOTAL of contributions from individuals ▶	181403.00	527255.00
(b) Political Party Committees.....	500.00	500.00
(c) Other Political Committees (such as PACs).....	16000.00	16500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	197903.00	544255.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	700000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	700000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
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)..... ▶	197903.00	1244255.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	419644.82	856747.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
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).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	419644.82	856747.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	609249.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	197903.00
25. SUBTOTAL (add Line 23 and Line 24).....	807152.46
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	419644.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	387507.64

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Kenneth Abramowitz

Mailing Address **PO Box 958**

City **Southport** State **CT** Zip Code **06890**

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

Name of Employer **NGN Capital** Occupation **Analyst**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.7043

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joann Adams

Mailing Address **168 Cleveland Ave.**

City **Rockville Centre** State **NY** Zip Code **11570**

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

Name of Employer **Sole Practioner** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1225.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.7044

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Thomas Alfano

Mailing Address **30 Ridgewood Street**

City **N. Valley Stream** State **NY** Zip Code **11580**

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

Name of Employer **Lock Law** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2150.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11AI.7045

Amount of Each Receipt this Period
150.00

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

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

1250.00

**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 6 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Paul Amoruso		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 2 Jericho Plaza		Transaction ID : SA11AI.7050
City Jericho	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Oxford & Simpson	Occupation Corporate Real Estate	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Maria Aramanda		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1225 Franklin Avenue		Transaction ID : SA11AI.7051
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) C. James Ashe		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 136 Bay Avenue		Transaction ID : SA11AI.7052
City Huntington Bay	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Marcum LLP	Occupation CPA	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
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 7 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Jason Barbara

Mailing Address 625 Summit Avenue

City Franklin Lakes State NJ Zip Code 07417

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7055

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Daniel Barbiero

Mailing Address 11 Raynham Road

City Glen Cove State NY Zip Code 11542

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

Name of Employer Requested Occupation Requested
 Beacon FS Ltd. Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7056

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Inez Baron

Mailing Address 167 E. Park Avenue

City Long Beach State NY Zip Code 11561

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

Name of Employer Requested Occupation Requested
 Inez Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7057

Amount of Each Receipt this Period
 300.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 8 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Rachel Barrett

Mailing Address 409 Bayville Avenue

City Bayville State NY Zip Code 11709

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

Name of Employer The Whitmore Group, Ltd. Occupation Insurance Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7058

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Danford Baxter

Mailing Address 1115 Little Whaleneck

City North Merrick State NY Zip Code 11566

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

Name of Employer N.F. Walker, Inc. Occupation Funeral Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.7059

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Albert Belbol

Mailing Address 28 Bernard St.

City Merrick State NY Zip Code 11566

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

Name of Employer Town of Hempstead Occupation Civil Servant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7060

Amount of Each Receipt this Period
100.00

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

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

850.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Andrew Bell

Mailing Address 130 Hill Park Avenue

City State Zip Code
Great Neck NY 11021

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

Name of Employer Occupation
Locks Law Firm PLLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11AI.7061

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ronald Bellistri

Mailing Address 2917 S. Ocean Blvd.

City State Zip Code
Highland Beach FL 33487

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.7062

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Richard Bivone

Mailing Address 308 East Meadow Avenue

City State Zip Code
East Meadow NY 11554

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

Name of Employer Occupation
RMB Drafting Services Inc/Electrical I President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.7065

Amount of Each Receipt this Period
500.00

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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
John Blasig

Mailing Address 83 Wall Street, Apt. 704

City State Zip Code
New York NY 10006

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

Name of Employer Occupation
UMS CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11AI.7066

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Edward Blumenfeld

Mailing Address 300 Robbins Lane

City State Zip Code
Syosset NY 11791

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

Name of Employer Occupation
Blumenfeld Development Group Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.7067

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Christina Bonlarron

Mailing Address 93 Croft Lane

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
CWG, Inc. Administrative Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11AI.7069

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 98
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Maria Bonlarron

Mailing Address 93 Croft Lane

City State Zip Code
Smithtown NY 11787

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11A1.7068

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Barry Borodkin

Mailing Address 1030-10 Franklin Avenue

City State Zip Code
N. Valley Stream NY 11580

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11A1.7070

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jack Brach

Mailing Address 733 Caffrey Avenue

City State Zip Code
Far Rockaway NY 11691

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

Name of Employer Requested Occupation Requested
Brach's Five Towns Supermarket Operator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11A1.7071

Amount of Each Receipt this Period
2600.00

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

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

4100.00

**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 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Takeymha Bright

Mailing Address Requested

City Requested State Zip Code
NY

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11A1.7074

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Takeymha Bright

Mailing Address Requested

City Requested State Zip Code
NY

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11A1.7075

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Nancy Brinker

Mailing Address 211 Via Tortuga

City Requested State Zip Code
Palm Beach FL 33480

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

Name of Employer Requested Occupation Requested
Susan G Komen Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : SA11A1.7076

Amount of Each Receipt this Period
 500.00

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

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

5700.00

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

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

FOR LINE NUMBER: PAGE 13 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Jeshayahu Brodchandel

Mailing Address 201 Harborview S

City Lawrence State NY Zip Code 11559

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7077

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Jeshayahu Brodchandel

Mailing Address 201 Harborview S

City Lawrence State NY Zip Code 11559

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7078

Amount of Each Receipt this Period
 2400.00

C. Full Name (Last, First, Middle Initial)
Bert Brodsky

Mailing Address 26 Harbor Park Drive

City Port Washington State NY Zip Code 11050

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

Name of Employer Requested Sandata Occupation Requested Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7079

Amount of Each Receipt this Period
 250.00

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

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

5250.00

**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 14 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Bert Brodsky

Mailing Address 26 Harbor Park Drive

City State Zip Code
Port Washington NY 11050

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

Name of Employer Occupation
Sandata Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.7080

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Louis Bruno

Mailing Address 26 Oakwood Hills Drive

City State Zip Code
East Islip NY 11730

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

Name of Employer Occupation
Charles J. O'Shea Funeral Home Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7082

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mark Bumante

Mailing Address 770 Shore Road

City State Zip Code
Long Beach NY 11561

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.7083

Amount of Each Receipt this Period
1500.00

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

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

2500.00

**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 15 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Laurie Buscemi

Mailing Address 77 Nebraska Street

City Long Beach	State NY	Zip Code 11561
--------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.7084

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Laurie Buscemi

Mailing Address 77 Nebraska Street

City Long Beach	State NY	Zip Code 11561
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7085

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ronald Cameron

Mailing Address PO Box 21440

City Little Rock	State AR	Zip Code 72221
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.7087

Amount of Each Receipt this Period
2600.00

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

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

3200.00

**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 16 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Anthony Capetola

Mailing Address 88 Rutgers Rd.

City Franklin	State NY	Zip Code 11596
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7089

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Anthony Capetola

Mailing Address 88 Rutgers Rd.

City Franklin	State NY	Zip Code 11596
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7090

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Robert M. Caron

Mailing Address 9 Majectic Drive

City Dix Hills	State NY	Zip Code 11746
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
----------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7094

Amount of Each Receipt this Period
300.00

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

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

1300.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Maura Clancy		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 126 Colonial Avenue		Transaction ID : SA11AI.7098
City Williston Park	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Clany & Clancy Brokerage, Ltd.	Occupation Insurance	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Richard Comi		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 70 Cambridge Drive		Transaction ID : SA11AI.7100
City Glenmont	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) C. David Cornstein		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 700 Park Avenue		Transaction ID : SA11AI.7102
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1950.00
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 18 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Stephen Cuchel

Mailing Address 333 Earle Ovington Blvd.

City Uniondale State NY Zip Code 11553

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

Name of Employer Healthplex, Inc. Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7104

Amount of Each Receipt this Period
2450.00

B. Full Name (Last, First, Middle Initial)
Armand D'Amato

Mailing Address 101 Park Avenue Suite 2506

City New York State NY Zip Code 01078

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

Name of Employer Park Strategies, LLC Occupation Managing Director and Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7107

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Robert D'Urso

Mailing Address 11 Bedford Avenue

City Rockville Centre State NY Zip Code 11570

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

Name of Employer Bob's Auto Body Occupation Self Employed (owner)

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7130

Amount of Each Receipt this Period
500.00

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

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

3950.00

**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 19 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Steven Dahlem

Mailing Address 10 Rockaway Ave.

City State Zip Code
Rockville Centre NY 11570

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11A1.7105

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James Dalto

Mailing Address 94 Linden Street

City State Zip Code
Malverne NY 11565

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

Name of Employer Occupation
Town of Hempstead Building Inspector

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11A1.7106

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
John DeGrace

Mailing Address 5 Fremont Road

City State Zip Code
Valley Stream NY 11581

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

Name of Employer Occupation
Self Insurance Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11A1.7110

Amount of Each Receipt this Period
200.00

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

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

600.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. John DeGrace		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 5 Fremont Road		Transaction ID : SA11AI.7109
City Valley Stream	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Self	Occupation Insurance Broker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 575.00	

Full Name (Last, First, Middle Initial) B. Ann M. Demichael		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 36 Centre Street		Transaction ID : SA11AI.7113
City Woodmere	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) C. Ann M. Demichael		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 36 Centre Street		Transaction ID : SA11AI.7114
City Woodmere	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

SUBTOTAL of Receipts This Page (optional).....	1125.00
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 21 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Nelson Demille

Mailing Address 61 Hilton Avenue, Ste 23

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11AI.7115

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Sandra Dillingham Demille

Mailing Address 88 Eleventh Street

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation Requested
Nelson DeMille Publicist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7122

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Dominick DiMaggio Jr.

Mailing Address 64 Cypress Street

City State Zip Code
Floral Park NY 11001

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

Name of Employer Requested Occupation Requested
Nassau County County Attorney County Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7123

Amount of Each Receipt this Period
100.00

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

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

5300.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Joann Distefano

Mailing Address 3853 New York Avenue

City Seaford State NY Zip Code 11783

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

Name of Employer Requested Occupation Asscess Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.7127

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Joann Distefano

Mailing Address 3853 New York Avenue

City Seaford State NY Zip Code 11783

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

Name of Employer Requested Occupation Asscess Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7125

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
Joann Distefano

Mailing Address 3853 New York Avenue

City Seaford State NY Zip Code 11783

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

Name of Employer Requested Occupation Asscess Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7126

Amount of Each Receipt this Period
 400.00

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

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

3000.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Robert Domini

Mailing Address 11 Plane Tree Lane

City State Zip Code
Dix Hills NY 11746

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7128

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jonathan Edwards

Mailing Address 4 White Oak Tree Road

City State Zip Code
Laurel Hollow NY 11791

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.7132

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Robert Elenowitz

Mailing Address 47 Valley Rd.

City State Zip Code
Old Westbury NY 11568

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

Name of Employer Requested Occupation Requested
Essaf Dist. Importer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7133

Amount of Each Receipt this Period
 1350.00

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

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

2350.00

**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 24 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Victor Emanuelo

Mailing Address 500 Bi-Country Blvd. - Suite 117

City Framingdale	State NY	Zip Code 11735
---------------------	-------------	-------------------

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

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7134

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Salvatore Evola

Mailing Address 545 Allen Road

City Woodmere	State NY	Zip Code 11598
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FEC ID number of contributing federal political committee. **C**

Name of Employer Town of Cedarhurst	Occupation CPA Treasurer
--	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.7136

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Robert Fensterman

Mailing Address 10 Woodstock Court

City Muttontown	State NY	Zip Code 11771
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FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7139

Amount of Each Receipt this Period
2600.00

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

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

3225.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Robert Ferraro

Mailing Address 1 Birch Street

City Lynbrook State NY Zip Code 11563

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

Name of Employer Robert Phillip Ferraro Architect PC Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7140

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Rhonda Fischer

Mailing Address 35 Gabriele Drive

City East Norwich State NY Zip Code 11732

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7141

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mark Fisher

Mailing Address 301 West 41, Suite 300

City Miami Beach State FL Zip Code 33140

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.7142

Amount of Each Receipt this Period
2600.00

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

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

3350.00

**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 26 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
James Flood

Mailing Address 125 Wind Watch Drive

City Hauppauge State NY Zip Code 11788

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

Name of Employer self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7143

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joel Florin

Mailing Address 27 Ormand Park Road

City Brookville State NY Zip Code 11545

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.7146

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mark Florin

Mailing Address 420 East 54 Street, #30C

City New York State NY Zip Code 11210

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

Name of Employer Micro Essential Laboratory Occupation CEO-Owner MFG Chemist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7145

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 27 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
David Fox

Mailing Address 37 Bayview Avenue

City State Zip Code
Great Neck NY 11021

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

Name of Employer Occupation
H. Fox & Co., Inc. Detective

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11A1.7147

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David Fried

Mailing Address 2510 Avenue K

City State Zip Code
Brooklyn NY 11210

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

Name of Employer Occupation
Mauzone Mania Healthy Food Manufacturer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11A1.7148

Amount of Each Receipt this Period
1800.00

C. Full Name (Last, First, Middle Initial)
G. Robert Gage Jr.

Mailing Address 72 Third Street

City State Zip Code
Garden City NY 11530

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

Name of Employer Occupation
Requested Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7151

Amount of Each Receipt this Period
1000.00

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

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

3050.00

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

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

FOR LINE NUMBER: PAGE 28 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
James Garner

Mailing Address 200-64 Hilton Avenue

City State Zip Code
Helpstead NY 11550

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

Name of Employer Occupation
Nassau County Government Gov't Worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11A1.7153

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Gus Georgiadis

Mailing Address 368 Rollins Drive

City State Zip Code
Malverne NY 11565

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

Name of Employer Occupation
Sallient Consulting Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11A1.7154

Amount of Each Receipt this Period
450.00

C. Full Name (Last, First, Middle Initial)
Zachary Gerut

Mailing Address 12145 Colonial Road

City State Zip Code
Hewlett NY 11557

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11A1.7156

Amount of Each Receipt this Period
1000.00

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

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

1550.00

**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 29 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Michael and Shirley Giacobbe

Mailing Address 1299 Corporate Drive, Apt 1508

City Westbury	State NY	Zip Code 11590
------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Requested
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.7158

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Marc Goldman

Mailing Address P Box 8020

City Garden City	State NY	Zip Code 11530
---------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Requested
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7159

Amount of Each Receipt this Period
1800.00

C. Full Name (Last, First, Middle Initial)
John Good

Mailing Address 100 Baker Court, Unit 111

City Island Park	State NY	Zip Code 11558
---------------------	-------------	-------------------

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

Name of Employer Requested	Occupation Requested
Self - MGI	Investigator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7160

Amount of Each Receipt this Period
500.00

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

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

2800.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Linda Green		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 62 Shadyside Avenue		Transaction ID : SA11A1.7161	
City Port Washington	State NY	Zip Code 11050	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) B. Joseph Hagin II		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2014	
Mailing Address 8053 Brill Road		Transaction ID : SA11A1.7164	
City Cincinnati	State OH	Zip Code 45243	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Requested	Occupation Requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Jack Halpern		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 160 West 66 Street, Apt. 51A		Transaction ID : SA11A1.7166	
City New York	State NY	Zip Code 10023	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Self	Occupation Real Estate		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Andrew Harman

Mailing Address 135 Shepard Lane

City Roslyn Heights State NY Zip Code 11577

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : SA11AI.7168

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Michael Hawksby

Mailing Address 51 Georgia Road

City Freehold State NJ Zip Code 07728

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

Name of Employer Requested Occupation Requested
 Rok Health & Fitness Health Club Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7169

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Charles Heine

Mailing Address 116 Albany Blvd., Unit 6E

City Atlantic Beach State NY Zip Code 11509

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

Name of Employer Requested Occupation Requested
 Town of Hempstead, NY Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7170

Amount of Each Receipt this Period
 100.00

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

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

2600.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Joseph Henshaw

Mailing Address 31 Cherry Lane

City Lynbrook State NY Zip Code 11563

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

Name of Employer Town of Hempstead Occupation Compliance Counsler

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7171

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Vernon Hill

Mailing Address 262 East Main Street

City Morristown State NJ Zip Code 08054

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

Name of Employer Melrose Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.7172

Amount of Each Receipt this Period
5200.00

C. Full Name (Last, First, Middle Initial)
Kenneth Honig

Mailing Address 2598 Locust Avenue

City North Bellmore State NY Zip Code 11710

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.7175

Amount of Each Receipt this Period
275.00

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

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

5575.00

**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 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Scott Horowitz

Mailing Address 2609 Kimberly Court

City Merrick State NY Zip Code 11566

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11A1.7176

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Helmut Huber

Mailing Address 107 Seventh Street

City Garden City State NY Zip Code 11530

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 26 / 2014

Transaction ID : SA11A1.7177

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Murray Huberfeld

Mailing Address 15 Manor Lane

City Lawrence State NY Zip Code 11559

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11A1.7178

Amount of Each Receipt this Period
2600.00

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

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

5700.00

**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 34 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Murray Huberfeld

Mailing Address 15 Manor Lane

City State Zip Code
Lawrence NY 11559

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7179

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
John Hyland

Mailing Address Requested

City State Zip Code
Requested

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7180

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
John Hyland

Mailing Address Requested

City State Zip Code
Requested

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7181

Amount of Each Receipt this Period
1500.00

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

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

4850.00

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

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

FOR LINE NUMBER: PAGE 35 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
John Ingleby

Mailing Address 433 E. Gore Creek Dr., Unit 11

City State Zip Code
Vail CO 81657

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7182

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Jandovitz

Mailing Address 58 Gladiolus Avenue

City State Zip Code
Floral Park NY 11001

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

Name of Employer Requested Occupation Requested
Self Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7185

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Stephen Jones

Mailing Address 83 Tenth Street

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation Requested
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7187

Amount of Each Receipt this Period
250.00

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 36 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Martha Kane

Mailing Address 211 Everitt Avenue

City State Zip Code
Hewlett Harbor NY 11557

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7189

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Harris Kantor

Mailing Address 113 Firestone Circle

City State Zip Code
Roslyn NY 11576

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7190

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Joan Kaufman

Mailing Address 450 SE 5th Ave., Apt 602N

City State Zip Code
Boca Raton FL 33432

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

Name of Employer Requested Occupation Requested
None None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7191

Amount of Each Receipt this Period
2600.00

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 37 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Frances Kayne

Mailing Address 601 Keswick Rd.

City Elmton State NY Zip Code 11003

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

Name of Employer Town of Hempstead Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7192

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph Kearney

Mailing Address 3889 LaGrange Road

City Shelbyville State KY Zip Code 40065

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

Name of Employer NC iDA Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7193

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Maureen Kearns

Mailing Address 205 Charles Street

City East Williston State NY Zip Code 11596

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.7194

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 38 OF 98
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
James Keating
Mailing Address 3 Euston Road
City State Zip Code
Garden City NY 11530
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Winthrop-University Hospital Marketing
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014
Transaction ID : SA11AI.7195
Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Francis Kiernan
Mailing Address 2780 Hunter Road
City State Zip Code
Weston FL 33331
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Artmark Products Corp Importer
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014
Transaction ID : SA11AI.7199
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Charles Kilbride
Mailing Address 7 Blue Spruce Road
City State Zip Code
Levittown NY 11756
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Requested Requested
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014
Transaction ID : SA11AI.7200
Amount of Each Receipt this Period
1000.00

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

2000.00

**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 39 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Brett Kingstone		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 8240 Exchange Drive, Ste Cloud 9		Transaction ID : SA11AI.7201
City Orlando	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Christine Kiourtsis		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 25-70 34th Street, 1st Floor		Transaction ID : SA11AI.7202
City Astoria	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. George Klein		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 535 Madison Avenue		Transaction ID : SA11AI.7203
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Requested Park Tower Group	Occupation Requested Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	4100.00
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 40 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Benjamin Klemanowicz Jr.

Mailing Address 100 Hilton Avenue, Unit 610

City Garden City State NY Zip Code 11530

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7204

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Catherine Knips

Mailing Address 15 St. Pauls Place

City Garden City State NY Zip Code 11530

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7205

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
William Koepfel

Mailing Address 333 Sunset Avenue

City Palm Beach State FL Zip Code 33480

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

Name of Employer Self Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.7206

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 41 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Jonathan Kohan

Mailing Address 134 Dutchess Boulevard

City Atlantic Beach State NY Zip Code 11509

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11A1.7208

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Stanley Kopilow

Mailing Address 100 Quentin Roosevelt Blvd

City Garden City State NY Zip Code 11530

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

Name of Employer Requested Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11A1.7210

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Stanley Kopilow

Mailing Address 100 Quentin Roosevelt Blvd

City Garden City State NY Zip Code 11530

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

Name of Employer Requested Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11A1.7211

Amount of Each Receipt this Period
100.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 42 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Tom Kossick

Mailing Address 4333 East Boulder Ridge

City State Zip Code
Phoenix AZ 85044

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

Name of Employer Occupation
Arizona's Bonding Agency, Inc. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 19 2014

Transaction ID : SA11AI.7212

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Charles Kovit

Mailing Address 1267 E. Turlane Place

City State Zip Code
Hewlett NY 11557

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014

Transaction ID : SA11AI.7213

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Irwin Krasnow

Mailing Address PO Box 278

City State Zip Code
Old Bethpage NY 11804

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 05 2014

Transaction ID : SA11AI.7214

Amount of Each Receipt this Period
500.00

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

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

1150.00

**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 43 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Robert Krener		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 6 1st Street		Transaction ID : SA11A1.7215
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Gary Krupp		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 395 Twin Lane South		Transaction ID : SA11A1.7216
City Wantagh	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Frank Kule		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1876 Leonard Lane		Transaction ID : SA11A1.7217
City Merrick	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 44 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Seryl Kushner

Mailing Address 30 Fawn Drive

City Livingston State NJ Zip Code 07039

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.7219

Amount of Each Receipt this Period
 5200.00

B. Full Name (Last, First, Middle Initial)
Louis Lagios

Mailing Address 53 Hillside Avenue

City Florham Park State NJ Zip Code 07932

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.7220

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Arnold Lanzillotta

Mailing Address 3415 Hampton Road

City Oceanside State NY Zip Code 11572

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

Name of Employer Requested Occupation Requested
 Business Owner Jonathan Arnold

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7221

Amount of Each Receipt this Period
 125.00

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

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

7925.00

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

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

FOR LINE NUMBER: PAGE 45 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Nancy Larsen

Mailing Address 51 East Avenue

City State Zip Code
Valley Stream NY 11580

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

Name of Employer Occupation
Bookkeeper Stern's Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7222

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Johnny Lee

Mailing Address 35 East 35th Street

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
Requested Cariologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7223

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Levine

Mailing Address 81 Barrow Street

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Douglaston Development Owner/Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7224

Amount of Each Receipt this Period
1000.00

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

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

1650.00

**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 46 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
David Levinson

Mailing Address 142 West 57 Street

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
L=L Holding Company LLC Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : SA11A1.7225

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Gary Lewi

Mailing Address 31 Westminster Road

City State Zip Code
Syosset NY 11791

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

Name of Employer Occupation
Rubenstein Associates Public Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11A1.7226

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Steven Libal

Mailing Address 872 Ok Lane

City State Zip Code
N. Woodmere NY 11581

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11A1.7227

Amount of Each Receipt this Period
1000.00

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

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

4100.00

**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 47 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Mindy Liebman

Mailing Address 237 Walker Place

City State Zip Code
West Hempstead NY 11552

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7229

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Frank Lima

Mailing Address 2301 Parkhurst Road

City State Zip Code
Elmont NY 11003

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

Name of Employer Requested Occupation Requested
Sanitation District 6 Sanitation Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7231

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Susan Lucci Huber

Mailing Address 107 Seventh Street

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation Requested
Pine Valley Productions, Inc. Actress

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7235

Amount of Each Receipt this Period
2600.00

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 48 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Kenneth Lysak Jr.

Mailing Address 12 Ron Court

City State Zip Code
Commack NY 11725

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7237

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Shalom Maidenbaum

Mailing Address 50 Bay Berry Road

City State Zip Code
Lawrence NY 11559

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7238

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
Patricia Manzo

Mailing Address 410 Jericho Turnpike, Ste 220

City State Zip Code
Jericho NY 11753

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

Name of Employer Requested Occupation Requested
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7239

Amount of Each Receipt this Period
 250.00

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: PAGE 49 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Joseph Marotta Jr.

Mailing Address 5 Excalibur Lane

City Nesconset State NY Zip Code 11767

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11A1.7244

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
James Mauceri

Mailing Address 159-24 82nd Street

City Howard Beach State NY Zip Code 11414

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

Name of Employer Requested Occupation Requested
 Mauceri Sign Co, Inc. Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.7245

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas McAleer

Mailing Address Requested

City Douglaston State NY Zip Code 11362

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11A1.7246

Amount of Each Receipt this Period
300.00

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

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

2800.00

**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 50 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Michael McGinty

Mailing Address 416 Long Beach Road

City State Zip Code
Island Park NY 11558

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7247

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Christopher McGrath

Mailing Address 1348 Hewlett Lane

City State Zip Code
Hewlett NY 11557

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

Name of Employer Occupation
Sullivan Papin Block McGrath Cannavo P Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7248

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Christopher McGrath

Mailing Address 1348 Hewlett Lane

City State Zip Code
Hewlett NY 11557

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

Name of Employer Occupation
Sullivan Papin Block McGrath Cannavo P Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7249

Amount of Each Receipt this Period
2600.00

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

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

5300.00

**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 51 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Raymond McGrath

Mailing Address 1714 Esquire Lane

City State Zip Code
McLean VA 22101

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.7250

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Thomas McKevitt

Mailing Address 147 Betty Road

City State Zip Code
East Meadow NY 11554

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.7251

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Eileen McLaughlin

Mailing Address 11 Claydon Road

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.7252

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Cindy McLoughlin

Mailing Address 8 Hawkins Drive

City Northport State NY Zip Code 11768

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

Name of Employer Cohn Reznick Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.7253

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Brendan McManamy

Mailing Address 60 Evans Avenue

City Elmont State NY Zip Code 11003

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

Name of Employer Town of Hempstead Occupation Laborer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.7254

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Robert McMillan

Mailing Address 23465 Harborview Rd., Apt 1031

City Punta Gorda State FL Zip Code 33980

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

Name of Employer Retired Occupation Retired Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SA11AI.7255

Amount of Each Receipt this Period
250.00

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

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

850.00

**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 53 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Francis McQuade		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 573 Magnolia Boulevard		Transaction ID : SA11AI.7256
City Long Beach	State NY	
Zip Code 11561		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00
Name of Employer Law Offices of Francis McQuade	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. John Medici		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1460 L Street		Transaction ID : SA11AI.7258
City Elmont	State NY	
Zip Code 11003		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 225.00
Name of Employer Town of Hempstead	Occupation Sanitation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Conrad Metzger		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 66-60 80 St., Apt 105		Transaction ID : SA11AI.7260
City Middle Village	State NY	
Zip Code 11379		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1350.00
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 54 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Nicole Meyer

Mailing Address 812 Park Avenue, Apt. 5D

City State Zip Code
New York NY 10021

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.7261

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Bernie Miglio

Mailing Address 249 West Merrick Road

City State Zip Code
Valley Stream NY 11580

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

Name of Employer Requested Occupation Requested
Self Employed Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7262

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Michael Mirotznik

Mailing Address 2995 Judith Drive

City State Zip Code
Bellmore NY 11560

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

Name of Employer Requested Occupation Requested
Mirotznik and Associates, LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7267

Amount of Each Receipt this Period
100.00

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 55 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Michael Mirotznik

Mailing Address 2995 Judith Drive

City State Zip Code
Bellmore NY 11560

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

Name of Employer Occupation
Mirotznik and Associates, LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7268

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
James Moriarty Jr.

Mailing Address 154 E. Walnut Street

City State Zip Code
Long Beach NY 11561

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7269

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Susan Morris

Mailing Address 1455 Broadway Avenue

City State Zip Code
Holbrook NY 11741

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7270

Amount of Each Receipt this Period
500.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 56 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Vincent Muscarella

Mailing Address 689 Colonade Road

City State Zip Code
West Hempstead NY 11552

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

Name of Employer Requested Occupation
Requested Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7271

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Norton Nesis

Mailing Address 140 West 86 Street

City State Zip Code
New York NY 10024

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

Name of Employer Requested Occupation
Requested Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7273

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Joseph Nocella Jr.

Mailing Address 3803 Morton Lane

City State Zip Code
Seaford NY 11783

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

Name of Employer Requested Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : SA11AI.7274

Amount of Each Receipt this Period
300.00

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: PAGE 57 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Craig Norberto

Mailing Address 50 Trade Zone Court

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11AI.7275

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Ohl

Mailing Address 12 Heath Place

City Garden City State NY Zip Code 11530

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

Name of Employer Requested Occupation Requested
 Morgan Stanley Investment Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.7276

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dara Orbach

Mailing Address 35 Surrey Lane

City Livingston State NJ Zip Code 07039

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.7278

Amount of Each Receipt this Period
 2600.00

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

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

4100.00

**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 58 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Peter Panaro

Mailing Address 4216 Merrick Road

City State Zip Code
Massapequa NY 11758

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

Name of Employer Occupation
Self Attorney at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7281

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Robert Pannell

Mailing Address 37 Oakside Road

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7282

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Peter Panzarino

Mailing Address 70 Bismark Avenue

City State Zip Code
Valley Stream NY 11581

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

Name of Employer Occupation
Mid-Island Mortgage Loan Originator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7283

Amount of Each Receipt this Period
 100.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 59 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Andrew Parise

Mailing Address 496 Arbuckle Avenue

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Village of Cedarhurst Occupation Local Gov't

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7284

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Andrew Parise

Mailing Address 496 Arbuckle Avenue

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Village of Cedarhurst Occupation Local Gov't

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7285

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Fred Perry

Mailing Address 175 Deer Park Road

City Dix Hills State NY Zip Code 11746

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11AI.7287

Amount of Each Receipt this Period
500.00

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

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

1300.00

**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 60 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Gregory Peterson

Mailing Address 100 Garden City Plaza, Suite 300

City	State	Zip Code
Garden City	NY	11530

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

Name of Employer	Occupation
Berkman, Jenock, Peterson, Pedey	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7288

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Brian Pinnola

Mailing Address 56 Kingsbury Road

City	State	Zip Code
Garden City	NY	11530

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

Name of Employer	Occupation
NAI Long Island	Partner, Commercial RE Brokers & Mana

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7290

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mark Plumer

Mailing Address 348 Pepperidge Rd.

City	State	Zip Code
Hewlett Harbor	NY	11557

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

Name of Employer	Occupation
Requested	Legal Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.7291

Amount of Each Receipt this Period
100.00

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

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

850.00

**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 61 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Mark Plumer

Mailing Address 348 Pepperidge Rd.

City State Zip Code
Hewlett Harbor NY 11557

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

Name of Employer Requested Occupation
Legal Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.7292

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Shepard Poole

Mailing Address 30 Chestnut Street

City State Zip Code
Garden City NY 11530

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

Name of Employer Requested Occupation
The Hallen Const. Co.Inc. President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7294

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Thomas Poole

Mailing Address 4270 Austin Boulevard

City State Zip Code
Island Park NY 11558

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

Name of Employer Requested Occupation
Hallen Constr. Co. Inc. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7293

Amount of Each Receipt this Period
500.00

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 62 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Robert Preston

Mailing Address **PO Box 274**

City **Greenvale** State **NY** Zip Code **11548**

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

Name of Employer Requested _____ Occupation Requested _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11A1.7296

Amount of Each Receipt this Period
 _____ **500.00**

B. Full Name (Last, First, Middle Initial)
John Prufeta

Mailing Address **15 Dolphin green**

City **Port Washington** State **NY** Zip Code **11050**

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

Name of Employer Requested **Medical Excellence International** Occupation Requested **Healthcare Executive**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SA11A1.7297

Amount of Each Receipt this Period
 _____ **2600.00**

C. Full Name (Last, First, Middle Initial)
Robert Rattet

Mailing Address **20 Davis Drive**

City **Armonk** State **NY** Zip Code **10504**

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

Name of Employer Requested _____ Occupation Requested _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : SA11A1.7300

Amount of Each Receipt this Period
 _____ **500.00**

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

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

_____ **3600.00**

**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 63 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Robert Reichenbach Jr.

Mailing Address 172 Whistler Road

City State Zip Code
Manhasset NY 11030

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

Name of Employer Occupation
Bird Bus Sales President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7302

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ruki Renov

Mailing Address 9 Beechwood Drive

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7304

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
George Repetti

Mailing Address 8402 Estero Blvd, Apt 605

City State Zip Code
Fort Myers Beach FL 33931

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.7305

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 64 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Alexander Rivero

Mailing Address 119 Spruce Street

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7306

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
William Rockensies

Mailing Address 66 Westminster Road

City W. Hempstead State NY Zip Code 11552

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

Name of Employer Requested Occupation Requested
 Town of Hempstead Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7307

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Rivki Rosenwald

Mailing Address 6 Forest Lane

City Lawrence State NY Zip Code 11559

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

Name of Employer Requested Occupation Requested
 Self Self

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7311

Amount of Each Receipt this Period
 1000.00

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

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

2100.00

**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 65 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) Victoria Ryan		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2014
Mailing Address 73 S. Penataquit Avenue		Transaction ID : SA11AI.7314
City Bay Shore	State NY	
Zip Code 11706		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer VR/PR	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Erica Sakol		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2014
Mailing Address 114 Old Country Road, Ste 200		Transaction ID : SA11AI.7315
City Mineola	State NY	
Zip Code 11501		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) William Sammon Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address Alicia Court		Transaction ID : SA11AI.7316
City Hempstead	State NY	
Zip Code 11552		Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Requested	Occupation Government	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	925.00
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 66 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Sharon Schechter

Mailing Address 65 East 76 Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Many's IT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11AI.7320

Amount of Each Receipt this Period
450.00

B. Full Name (Last, First, Middle Initial)
Stephen Schenker

Mailing Address 15 Hill and Tree Court

City State Zip Code
Melville NY 11747

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11AI.7323

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Joel Schneider

Mailing Address 124 Cedarhurst Avenue

City State Zip Code
Cedarhurst NY 11516

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11AI.7325

Amount of Each Receipt this Period
300.00

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

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

1050.00

**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 67 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Joel Schneider

Mailing Address 124 Cedarhurst Avenue

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.7326

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Martin Schwartz

Mailing Address 187 1st Avenue

City Massapequa Park State NY Zip Code 11762

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7328

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Dean Sisun

Mailing Address 234 Somerset Drive

City Hewlett State NY Zip Code 11557

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 05 / 2014

Transaction ID : SA11AI.7335

Amount of Each Receipt this Period
500.00

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

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

850.00

**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 68 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Jeffrey Skar

Mailing Address 500 Bedford Avenue

City State Zip Code
Bellmore NY 11710

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7336

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Clifford Sobel

Mailing Address 225 Millburn Avenue

City State Zip Code
Millburn NJ 07041

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

Name of Employer Requested Occupation Requested
Self Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.7337

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Cathy Cyphers Soref

Mailing Address 10 Stoddart Court

City State Zip Code
Locust Valley NY 11560

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

Name of Employer Requested Occupation Requested
Self Philanthropisht for Genetic Research

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7338

Amount of Each Receipt this Period
250.00

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: PAGE 69 OF 98
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Donald Tirino

Mailing Address 310 Oakford Street

City State Zip Code
W. Hempstead NY 11552

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

Name of Employer Occupation
Town of Hempstead Asst. Supervisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7344

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Joseph Tiso

Mailing Address 1506 Holiday Park Drive

City State Zip Code
Wantagh NY 11793

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

Name of Employer Occupation
Requested Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7345

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Matthew Travaglia

Mailing Address 1536 Imperial Avenue

City State Zip Code
New Hyde Park NY 11040

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

Name of Employer Occupation
NYPD Retired- Law Enforcement

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7347

Amount of Each Receipt this Period
500.00

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 70 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Richard Turan

Mailing Address 183 Harbor Road

City Cold Spring Harbor State NY Zip Code 11724

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.7348

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eli Verschleiser

Mailing Address 44 Wall Street

City New York State NY Zip Code 10005

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

Name of Employer Requested Occupation Requested
Multi Group of Companies Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.7349

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Wayne Vulture

Mailing Address 2664 Windsor Avenue

City Oceanside State NY Zip Code 11572

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.7350

Amount of Each Receipt this Period
500.00

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 71 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Arthur Walsh		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 347 Plainfield Avenue		Transaction ID : SA11AI.7351
City Floral Parl	State NY	
Zip Code 11001		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Nassau OTB	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) B. Kenneth Weinstein		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2014
Mailing Address 12 Whitney Circle		Transaction ID : SA11AI.7354
City Glen Cove	State NY	
Zip Code 11542		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. David Westermann Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 333 Earle Ovington Blvd., Ste. 702		Transaction ID : SA11AI.7356
City Uniondale	State NY	
Zip Code 11553		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
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: PAGE 72 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
James Wilson

Mailing Address 165 East 32 St., Apt 20B

City State Zip Code
New York NY 10016

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.7357

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Glenn Yanoff

Mailing Address 7539 Isla Verde Way

City State Zip Code
Delray Beach FL 33446

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

Name of Employer Requested Occupation Requested
Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11AI.7358

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Judy Zeitlin

Mailing Address 2549 Howard Road

City State Zip Code
North Bellmore NY 11710

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

Name of Employer Requested Occupation Requested
Town of Hempstead ADM Officer II

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7360

Amount of Each Receipt this Period
 100.00

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

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

2600.00

**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 73 OF 98
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
Myrna Zisman

Mailing Address 40 Maple Avenue

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Requested Occupation Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7362

Amount of Each Receipt this Period
100.00

B. 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

100.00

166525.00

**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 74 OF 98
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
NYS Conservative Party Federal Account

Mailing Address 486 78th Street

City State Zip Code
Brooklyn NY 11209

FEC ID number of contributing federal political committee. **C** C00282343

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11B.6712

Amount of Each Receipt this Period
500.00

B. 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

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

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

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

500.00

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 75 OF 98
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
COUNTRY FIRST POLITICAL ACTION COMMITTEE INC. (COUNTRY FIRST PAC)

Mailing Address 228 S WASHINGTON STREET SUITE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00457705**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11C.6716

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I

City State Zip Code
WEST CHESTER OH 45069

FEC ID number of contributing federal political committee. **C C00237198**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11C.6719

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Pinnacle West PAC

Mailing Address 400 N. 5th Street

City State Zip Code
Phoenix AZ 85004

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : SA11C.6710

Amount of Each Receipt this Period
1500.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 98
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. Full Name (Last, First, Middle Initial)
PROMOTING OUR REPUBLICAN TEAM PAC

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code
CINCINNATI OH 45244

FEC ID number of contributing federal political committee. **C C00440032**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 30 2014

Transaction ID : SA11C.6713

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN JEWISH COALITION-POLITICAL ACTION COMMITTEE (RJC-PAC)

Mailing Address 50 F STREET NW SUITE 100

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00345132**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 12 2014

Transaction ID : SA11C.6721

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
The Freedom Project

Mailing Address 320 First Street SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 08 2014

Transaction ID : SA11C.6717

Amount of Each Receipt this Period
 5000.00

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

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

11000.00

16000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. A&M Supplies		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 2468 N. Jerusalem Avenue		Amount of Each Disbursement this Period 4492.50 Transaction ID : SB17.6062
City No. Bellmore	State NY Zip Code 11554	
Purpose of Disbursement Advertising	001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. A&M Supplies		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 2468 N. Jerusalem Avenue		Amount of Each Disbursement this Period 2028.03 Transaction ID : SB17.6067
City No. Bellmore	State NY Zip Code 11554	
Purpose of Disbursement Advertising	001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Advantage Direct		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2300 Clarendon Blvd.		Amount of Each Disbursement this Period 7630.05 Transaction ID : SB17.5978
City Arlington	State VA Zip Code 22201	
Purpose of Disbursement Commercial Mailing lists	001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14150.58
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 Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Advantage Direct		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		23		2014
M M	/	D D	/	Y Y Y Y									
08		23		2014									
Mailing Address 2300 Clarendon Blvd.		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22201</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22201	<table border="1"> <tr> <td>14706.00</td> </tr> </table>		14706.00			
City	State	Zip Code											
Arlington	VA	22201											
14706.00													
Purpose of Disbursement Robo Calls		Transaction ID : SB17.6038											
Candidate Name		Category/Type 001											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2014												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. American Express AXP Discount		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		07		2014
M M	/	D D	/	Y Y Y Y									
07		07		2014									
Mailing Address PO Box 53773		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85072</td> </tr> </table>		City	State	Zip Code	Phoenix	AZ	85072	<table border="1"> <tr> <td>463.09</td> </tr> </table>		463.09			
City	State	Zip Code											
Phoenix	AZ	85072											
463.09													
Purpose of Disbursement Credit Card Fees		Transaction ID : SB17.5977											
Candidate Name		Category/Type 001											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2014												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. American Express AXP Discount		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		05		2014
M M	/	D D	/	Y Y Y Y									
09		05		2014									
Mailing Address PO Box 53773		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85072</td> </tr> </table>		City	State	Zip Code	Phoenix	AZ	85072	<table border="1"> <tr> <td>261.30</td> </tr> </table>		261.30			
City	State	Zip Code											
Phoenix	AZ	85072											
261.30													
Purpose of Disbursement Merchant fee		Transaction ID : SB17.6056											
Candidate Name		Category/Type 001											
Office Sought: <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>		<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For: 2014												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	15430.39
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 Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Baldwin Technical Support, Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 87 Willow Street			Amount of Each Disbursement this Period 450.00	
City Garden City	State NY	Zip Code 11530	Transaction ID : SB17.5998	
Purpose of Disbursement IT Support		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Baldwin Technical Support, Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014	
Mailing Address 87 Willow Street			Amount of Each Disbursement this Period 525.00	
City Garden City	State NY	Zip Code 11530	Transaction ID : SB17.6035	
Purpose of Disbursement IT services		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Bee, Ready, Fishbein, Hatter & Donovan			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 170 Old Country Rd			Amount of Each Disbursement this Period 2226.50	
City Mineola	State NY	Zip Code 11501	Transaction ID : SB17.5993	
Purpose of Disbursement ballot signature fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3201.50
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 Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Bee, Ready, Fishbein, Hatter & Donovan			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014		
Mailing Address 170 Old Country Rd			Amount of Each Disbursement this Period 4000.00		
City Mineola	State NY	Zip Code 11501	Transaction ID : SB17.5994		
Purpose of Disbursement ballot signature fees		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Bee, Ready, Fishbein, Hatter & Donovan			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014		
Mailing Address 170 Old Country Rd			Amount of Each Disbursement this Period 3816.30		
City Mineola	State NY	Zip Code 11501	Transaction ID : SB17.6050		
Purpose of Disbursement ballot signature costs		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Better L.I. PAC			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014		
Mailing Address 333 Earle Ovington Blvd.			Amount of Each Disbursement this Period 500.00		
City Uniondale	State NY	Zip Code 11553	Transaction ID : SB17.5990		
Purpose of Disbursement Refund of check received		010 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional)	8316.30
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 Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

A. BKCD Processing

Full Name (Last, First, Middle Initial)
Mailing Address 515 Broadhollow Road

City Mellville State NY Zip Code 11747

Purpose of Disbursement
Credit card services fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2014

Amount of Each Disbursement this Period: 103.91

Transaction ID : SB17.6045

Category/Type: 001

B. Bruce Blakeman

Full Name (Last, First, Middle Initial)
Mailing Address 773 West Park Avenue

City Long Beach State NY Zip Code 11561

Purpose of Disbursement
Partial repayment of loan

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 21 / 2014

Amount of Each Disbursement this Period: 25000.00

Transaction ID : SB17.6037

Category/Type: 009

c. Bottom Line Marketing

Full Name (Last, First, Middle Initial)
Mailing Address 2076 Flatbush Avenue

City Brooklyn State NY Zip Code 11234

Purpose of Disbursement
Campaign brochure

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 11 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.6026

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional) 26103.91

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 Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Bottom Line Marketing		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 2076 Flatbush Avenue		Amount of Each Disbursement this Period 1831.23 Transaction ID : SB17.6040
City Brooklyn	State NY	
Zip Code 11234	Purpose of Disbursement Balance of invoice for campaign brochure	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bottom Line Marketing		Date of Disbursement MM / DD / YYYY 09 / 22 / 2014
Mailing Address 2076 Flatbush Avenue		Amount of Each Disbursement this Period 1006.00 Transaction ID : SB17.6070
City Brooklyn	State NY	
Zip Code 11234	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Bowditch & Dewey, LLP		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 311 Main Street		Amount of Each Disbursement this Period 4550.66 Transaction ID : SB17.6380
City Worcester	State MA	
Zip Code 01615	Purpose of Disbursement Legal Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	7387.89
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 Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. CCC Enterprises		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 324 West 19 St.		Amount of Each Disbursement this Period 25000.00 Transaction ID : SB17.5974
City Deer Park	State NY	
Zip Code 11729	Purpose of Disbursement Mailings/Signs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CCC Enterprises		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 324 West 19 St.		Amount of Each Disbursement this Period 18114.50 Transaction ID : SB17.6060
City Deer Park	State NY	
Zip Code 11729	Purpose of Disbursement Mailings/Signs	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Coral House		Date of Disbursement MM / DD / YYYY 09 / 29 / 2014
Mailing Address 70 Milburn Avenue		Amount of Each Disbursement this Period 5350.00 Transaction ID : SB17.6073
City Baldwin	State NY	
Zip Code 11510	Purpose of Disbursement Fundraiser 9/29	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	48464.50
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 Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Judith Czak		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 22 Everett St.		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5969
City Valley Stream	State NY	
Purpose of Disbursement Administrative Consulting - June	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Judith Czak		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 22 Everett St.		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.6003
City Valley Stream	State NY	
Purpose of Disbursement Administrative Consulting - July	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Judith Czak		Date of Disbursement MM / DD / YYYY 08 / 23 / 2014
Mailing Address 22 Everett St.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6039
City Valley Stream	State NY	
Purpose of Disbursement Administrative Consulting	Category/ Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6500.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Judith Czak		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 22 Everett St.		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.6044
City Valley Stream	State NY	
Zip Code 11580	Purpose of Disbursement Administrative Consulting - August	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. David Grandeau & Associates		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 12 Valleywood Drive		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.6049
City Niskayuna	State NY	
Zip Code 12309	Purpose of Disbursement Consulting services - June	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Empire Campaign Solutions		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 6 Century Hill Drive		Amount of Each Disbursement this Period 5731.49 Transaction ID : SB17.6048
City Latham	State NY	
Zip Code 12110	Purpose of Disbursement Research Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11231.49
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 Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. John McLaughlin & Associates		Date of Disbursement MM / DD / YYYY 08 / 02 / 2014
Mailing Address 566 So. Rte 303		Amount of Each Disbursement this Period 19594.00 Transaction ID : SB17.6008
City Blauvelt	State NY	
Zip Code 10913	Purpose of Disbursement CD 4 Survey	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. John McLaughlin Media Acct		Date of Disbursement MM / DD / YYYY 09 / 04 / 2014
Mailing Address 566 So. Rte 303		Amount of Each Disbursement this Period 115000.00 Transaction ID : SB17.6053
City Blauvelt	State NY	
Zip Code 10913	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. John McLaughlin Media Acct		Date of Disbursement MM / DD / YYYY 09 / 24 / 2014
Mailing Address 566 So. Rte 303		Amount of Each Disbursement this Period 80000.00 Transaction ID : SB17.6071
City Blauvelt	State NY	
Zip Code 10913	Purpose of Disbursement Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	214594.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Joint Republican Headquarters		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 721 Franklin Ave.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5975
City Franklin Square	State NY	
Zip Code 11010	Purpose of Disbursement July rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Joint Republican Headquarters		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 721 Franklin Ave.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6004
City Franklin Square	State NY	
Zip Code 11010	Purpose of Disbursement August rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Joint Republican Headquarters		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014
Mailing Address 721 Franklin Ave.		Amount of Each Disbursement this Period 11077.51 Transaction ID : SB17.6020
City Franklin Square	State NY	
Zip Code 11010	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12077.51
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 Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Joint Republican Headquarters		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 721 Franklin Ave.		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6051
City Franklin Square	State NY	
Zip Code 11010	Purpose of Disbursement September rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. KB Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 3213 Duke St., Ste 700		Amount of Each Disbursement this Period 1587.00 Transaction ID : SB17.5988
City Alexandria	State VA	
Zip Code 23314	Purpose of Disbursement Fundraising Consulting- June	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. KB Strategic Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 3213 Duke St., Ste 700		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.6027
City Alexandria	State VA	
Zip Code 23314	Purpose of Disbursement Fundraising consulting - July	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3287.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. KB Strategic Group			Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address 3213 Duke St., Ste 700			Amount of Each Disbursement this Period 1956.25 Transaction ID : SB17.6028
City Alexandria	State VA	Zip Code 23314	
Purpose of Disbursement Event costs		Category/ Type 007	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. KB Strategic Group			Date of Disbursement MM / DD / YYYY 09 / 16 / 2014
Mailing Address 3213 Duke St., Ste 700			Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.6066
City Alexandria	State VA	Zip Code 23314	
Purpose of Disbursement Fundraising Consulting - September		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Mio Posto			Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 2757 Long Beach Road			Amount of Each Disbursement this Period 4500.00 Transaction ID : SB17.6002
City Oceanside	State NY	Zip Code 11572	
Purpose of Disbursement Event costs		Category/ Type 007	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7656.25
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 Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 98			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Nassau County Republican Com			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014	
Mailing Address 164 Post Avenue			Amount of Each Disbursement this Period 250.00	
City Westbury	State NY	Zip Code 11590	Transaction ID : SB17.6022	
Purpose of Disbursement Event Admission		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. NYS Police Chiefs Benevolent Association			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014	
Mailing Address 2649 Strang Boulevard			Amount of Each Disbursement this Period 500.00	
City Torktown Heights	State NY	Zip Code 10598	Transaction ID : SB17.5980	
Purpose of Disbursement Event Admission		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Pat Cairo Family Foundation			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014	
Mailing Address 40 Parkwold Drive West			Amount of Each Disbursement this Period 375.00	
City N. Valley Stream	State NY	Zip Code 11580	Transaction ID : SB17.5992	
Purpose of Disbursement Golf and dinner		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1125.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Pete King for Congress		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.6034
City Seaford	State NY	
Zip Code 11783	Purpose of Disbursement Political event admission	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Prince Umberto's		Date of Disbursement MM / DD / YYYY 08 / 09 / 2014
Mailing Address 721 Franklin Ave.		Amount of Each Disbursement this Period 923.00 Transaction ID : SB17.6017
City Franklin Square	State NY	
Zip Code 11010	Purpose of Disbursement Event costs	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Proteus Strategies		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 132 Lafayette Pl.		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.5986
City Woodmere	State NY	
Zip Code 11598	Purpose of Disbursement Management Consulting services June/July	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5223.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 98	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Proteus Strategies		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 132 Lafayette Pl.		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6043
City Woodmere	State NY	
Zip Code 11598	Purpose of Disbursement Management Consulting - August	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Proteus Strategies		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 132 Lafayette Pl.		Amount of Each Disbursement this Period 465.67 Transaction ID : SB17.6059
City Woodmere	State NY	
Zip Code 11598	Purpose of Disbursement Reimbursement of expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. TD Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.6005
City Garden City	State NY	
Zip Code 11530	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2485.67
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 Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. TD Bank		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		01		2014
M M	/	D D	/	Y Y Y Y								
08		01		2014								
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period										
City	State											
Garden City	NY	11530										
Purpose of Disbursement	Category/ Type	150.00										
Bank Fee			001									
Candidate Name	Transaction ID : SB17.6006											
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General											
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. TD Bank		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		15		2014
M M	/	D D	/	Y Y Y Y								
08		15		2014								
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period										
City	State											
Garden City	NY	11530										
Purpose of Disbursement	Category/ Type	20.00										
Bank Fee			001									
Candidate Name	Transaction ID : SB17.6029											
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General											
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. TD Bank		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		15		2014
M M	/	D D	/	Y Y Y Y								
08		15		2014								
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period										
City	State											
Garden City	NY	11530										
Purpose of Disbursement	Category/ Type	300.00										
Bank Fee			001									
Candidate Name	Transaction ID : SB17.6030											
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General											
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	470.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 98			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. TD Bank		M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period 25.00
City Garden City	State NY Zip Code 11530	
Purpose of Disbursement Bank Fee	Category/Type 001	Transaction ID : SB17.6054
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. TD Bank		M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 855 Franklin St.		Amount of Each Disbursement this Period 25.00
City Garden City	State NY Zip Code 11530	
Purpose of Disbursement Bank Fee	Category/Type 001	Transaction ID : SB17.6072
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. The Victory Group		M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1220 Hillshire Rd.		Amount of Each Disbursement this Period 30000.00
City Baltimore	State MD Zip Code 21222	
Purpose of Disbursement Retainer/Filming & Editing	Category/Type 004	Transaction ID : SB17.6055
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30050.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 98		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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)
Blakeman 2014 Inc.

Full Name (Last, First, Middle Initial) A. Town of Hempstead Rep. Com		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 164 Post Avenue		Amount of Each Disbursement this Period 350.00
City Westbury	State NY	
Zip Code 11590	Purpose of Disbursement Event Admission	Transaction ID : SB17.5982
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 260 Elmont Rd		Amount of Each Disbursement this Period 98.00
City Elmont	State NY	
Zip Code 11003	Purpose of Disbursement Postage	Transaction ID : SB17.5985
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	448.00
TOTAL This Period (last page this line number only).....	418202.99

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Blakeman 2014 Inc.** Transaction ID : **SC/10.4099**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Bruce Blakeman** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 770 Shore Road
 Unit A

City	State	ZIP Code
Long Beach	NY	11561

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS Date Incurred: M 03 / D 04 / Y 2014 Date Due: M M / D D / Y Demand Interest Rate: 3.00 % (apr) Secured: 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).....	▶	100000.00
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)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Blakeman 2014 Inc.

Transaction ID : **SC/10.4101**

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

Bruce Blakeman

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
770 Shore Road
Unit A

City State ZIP Code
Long Beach NY 11561

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100000.00 0.00 100000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
03 / 28 / 2014 M M / D D / Demand 3.00 % (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)..... 100000.00

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)
LOANS

NAME OF COMMITTEE (In Full) **Blakeman 2014 Inc.** Transaction ID : **SC/10.5301**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Bruce Blakeman** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 770 Shore Road
 Unit A

City State ZIP Code
 Long Beach NY 11561

Original Amount of Loan 500000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500000.00
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TERMS

Date Incurred M 06 / D 30 / Y 2014	Date Due M M / D D / Y Y Y Y Demand	Interest Rate 3.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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).....	500000.00
TOTALS This Period (last page in this line only).....	700000.00

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