

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

Elizabeth Crowley for Congress

ADDRESS (number and street)

77-24 83 Street

Check if different than previously reported. (ACC)

Glendale

NY

11385

2. FEC IDENTIFICATION NUMBER

C00517359

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N) [X]

OR

AMENDED (A) [ ]

NY

06

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) [X]

Termination Report (TER) [ ]

(b) 12-Day PRE-Election Report for the:

- Primary (12P) [ ] General (12G) [ ] Runoff (12R) [ ]
Convention (12C) [ ] Special (12S) [ ]

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) [ ] Runoff (30R) [ ] Special (30S) [ ]

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY 10/01/2014

through

MM/DD/YYYY 12/31/2014

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 Ms. Moira M. McDermott

Signature of Treasurer Ms. Moira M. McDermott

[Electronically Filed]

Date

MM/DD/YYYY 01/31/2015

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

Table with 8 columns and 1 row for Office Use Only.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Elizabeth Crowley for Congress**

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))....	0.00	371346.18
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	29402.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	341944.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	0.00	335318.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3338.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	0.00	331980.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1735.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	700.00	

**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

**Elizabeth Crowley for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	263096.18
(ii) Unitemized.....	0.00	50.00
(iii) TOTAL of contributions from individuals ▶	0.00	263146.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	108200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	371346.18
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	3338.75
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	0.00	374684.93

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	335318.99
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	14452.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	14950.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	29402.00
21. OTHER DISBURSEMENTS .....	0.00	570.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	365290.99

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1735.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	1735.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1735.91

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 5 OF 5
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Elizabeth Crowley for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms. Moira M McDermott</b>	Nature of Debt (Purpose): Compliance
Mailing Address 240-38 42nd avenue	
City State Zip Code Douglaston NY 11363	

Outstanding Balance Beginning This Period 700.00	<b>Transaction ID : D540566</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	700.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	700.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	700.00