

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

ADDRESS (number and street) 4 IRVING PLACE  
ROOM 506  
 Check if different than previously reported. (ACC)  
NEW YORK NY 10003

2. **FEC IDENTIFICATION NUMBER** C00407635  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 06 30 2007

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 GRACE SCARPITTA

Signature of Treasurer Electronically Filed by GRACE SCARPITTA Date 07 31 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |          |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 7 |  | 46159.99 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |          |
| 2   | 0                       | 0                                 | 7 |   |   |   |   |   |  |          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 46159.99                |                                   |   |   |   |   |   |   |  |          |
| (c) Total Receipts (from Line 19) .....   | 26445.42                | 26445.42                          |   |   |   |   |   |   |  |          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 72605.41                | 72605.41                          |   |   |   |   |   |   |  |          |
| 7. Total Disbursements (from Line 31) .....   | 26975.00                | 26975.00                          |   |   |   |   |   |   |  |          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 45630.41                | 45630.41                          |   |   |   |   |   |   |  |          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |          |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |   |   |   |   |   |   |  |          |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 22655.96                      | 22655.96                          |
| (i) Itemized (use Schedule A) .....  | 3789.46                       | 3789.46                           |
| (ii) Unitemized .....  | 26445.42                      | 26445.42                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 26445.42                      | 26445.42                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 26445.42                      | 26445.42                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 26445.42                      | 26445.42                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                      |                               |                                   |
| (i) Federal Share.....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....   | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                           | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 3000.00                       | 3000.00                           |
| 24. Independent Expenditure (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....  | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....   | 0.00                          | 0.00                              |
| 27. Loans Made.....   | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements.....  | 23975.00                      | 23975.00                          |
| 30. Federal Election Activity (2 U.S.C 431(20))   |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)   |                               |                                   |
| (i) Federal Share .....   | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....               | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..        | 26975.00                      | 26975.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 26975.00                      | 26975.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 26445.42                      | 26445.42                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 26445.42                      | 26445.42                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

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

|  |   |             |
|--|---|-------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 6 / 34 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |             |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |             |

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

NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Hilary Ayala   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 15 Locust Street  |  | <b>Transaction ID:</b> SA11A1.5346                       |  |
| City State Zip Code<br>Greenwich CT 06830   | Amount of Each Receipt this Period<br>300.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Manager - Gov't Relations      |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00           |  |  |

|   |   |  |  |
|---|---|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>John Banks   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 184 St. John's Place  |   | <b>Transaction ID:</b> SA11A1.5347                       |  |
| City State Zip Code<br>Brooklyn NY 11217  | Amount of Each Receipt this Period<br>1387.92 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>VP - Gov't Relations            |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1387.92           |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Stephen B Bram   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 15 / 2007 |  |
| Mailing Address 9 Irene Ct  |  | <b>Transaction ID:</b> SA11A1.5422                       |  |
| City State Zip Code<br>Edison NJ 08820  | Amount of Each Receipt this Period<br>900.00   |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Ed Solutions  | Occupation<br>Group President of Non-Regulated |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>900.00             |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2587.92 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 / 34                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |   |
|---|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Louis Buck   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 6 / 1 5 / 2 0 0 7 |
| Mailing Address 452 Rosedale Avenue   |  | <b>Transaction ID:</b> SA11A1.5423                              |
| City State Zip Code<br>White Plains NY 10605  | Amount of Each Receipt this Period<br>600.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>Con Ed Development  | Occupation<br>CFO and VP of CSS              |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00           |   |

|   |   |   |
|---|---|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Kevin Burke  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 6 / 1 0 / 2 0 0 7 |
| Mailing Address 455 East 86th Street  |   | <b>Transaction ID:</b> SA11A1.5361                              |
| City State Zip Code<br>New York NY 10028  | Amount of Each Receipt this Period<br>3906.25 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>Con Edison  | Occupation<br>President and CEO               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>3906.25           |   |

|   |  |   |
|---|--|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Marilyn Caselli  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>0 6 / 1 0 / 2 0 0 7 |
| Mailing Address 52 Philip Ave   |  | <b>Transaction ID:</b> SA11A1.5362                              |
| City State Zip Code<br>Staten Island NY 10312   | Amount of Each Receipt this Period<br>600.00     |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>Con Edison  | Occupation<br>Vice-President - Customers Service |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00               |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 5106.25 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 / 34                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|  |  |  |  |
|--|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>David Desanti   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 12 Newton Court  |  | <b>Transaction ID:</b> SA11A1.5369                       |  |
| City State Zip Code<br>Croton NY 10520   | Amount of Each Receipt this Period<br>227.83 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>  |  |  |  |
| Name of Employer Occupation<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>227.83                       |  |

|   |  |  |  |
|---|--|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>David Gmach              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 75 Prospect Park West Apt 6D                                  |  | <b>Transaction ID:</b> SA11A1.5376                       |  |
| City State Zip Code<br>Brooklyn NY 11215                                      | Amount of Each Receipt this Period<br>210.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>           |  |  |  |
| Name of Employer Occupation<br>Con Edison Director - Manhattan Public Affairs |  | Aggregate Year-to-Date ▼<br>210.00                       |  |

|  |   |  |  |
|--|---|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Robert Hogleund |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 151 Central Park West 2W                             |   | <b>Transaction ID:</b> SA11A1.5379                       |  |
| City State Zip Code<br>New York NY 10023                             | Amount of Each Receipt this Period<br>1392.07 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>  |   |  |  |
| Name of Employer Occupation<br>Con Edison Senior VP & CFO            |   | Aggregate Year-to-Date ▼<br>1392.07                      |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1829.90 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |



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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 / 34                  |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |   |   |
|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Peter Irwin  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 0 / 2 0 0 7 |
| Mailing Address 250 First Ave<br>Apt 3B   |   | <b>Transaction ID:</b> SA11A1.5381                            |
| City State Zip Code<br>New York NY 10023  | Amount of Each Receipt this Period<br>1102.66 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |   |   |
| Name of Employer<br>Con Edison  | Occupation<br>VP - Legal                      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1102.66           |   |

|   |  |   |
|---|--|---|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Paul Kinkel  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 0 / 2 0 0 7 |
| Mailing Address 155 Moog Road   |  | <b>Transaction ID:</b> SA11A1.5384                            |
| City State Zip Code<br>Garrison NY 10524  | Amount of Each Receipt this Period<br>600.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>Con Edison  | Occupation<br>VP                             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>600.00           |   |

|   |  |   |
|---|--|---|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Kevin Lanahan  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 0 / 2 0 0 7 |
| Mailing Address 106 Avenue of the Oaks  |  | <b>Transaction ID:</b> SA11A1.5385                            |
| City State Zip Code<br>Clifton Park NY 12065  | Amount of Each Receipt this Period<br>300.00 |   |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |   |
| Name of Employer<br>Con Edison  | Occupation<br>Manager - Gov't Relations      |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00           |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 2002.66 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 / 34                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |  |  |
|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mr. Michael Madia  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 15 / 2007 |  |
| Mailing Address 2 Dunston Lande   |  | <b>Transaction ID:</b> SA11A1.5426                       |  |
| City State Zip Code<br>Monmouth Jct. NJ 08852   | Amount of Each Receipt this Period<br>252.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Ed Development  | Occupation<br>CED - VP & COO                 |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>252.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mary McCartney   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 201 West 74th Street  |  | <b>Transaction ID:</b> SA11A1.5388                       |  |
| City State Zip Code<br>New York NY 10023  | Amount of Each Receipt this Period<br>700.02 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Director - Public Affairs      |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>700.02           |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mary Jane McCartney  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 83-38 Penelope Ave  |  | <b>Transaction ID:</b> SA11A1.5389                       |  |
| City State Zip Code<br>Middle Village NY 11379  | Amount of Each Receipt this Period<br>705.08 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Senior VP                      |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>705.08           |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1657.10 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 11 / 34 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. John McMahon</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 3 0 / 2 0 0 7 |  |
| Mailing Address 115 Middletown Place  |  | <b>Transaction ID: SA11A1.5435</b>                            |  |
| City State Zip Code<br>Bronxville NY 10708  |  | Amount of Each Receipt this Period<br>3185.38                 |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>Orange & Rockland President and CEO  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>3185.38                           |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Christine Meloro</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 5 / 2 0 0 7 |  |
| Mailing Address 42 Lane Court   |  | <b>Transaction ID: SA11A1.5427</b>                            |  |
| City State Zip Code<br>Old Bridge NJ 08857  |  | Amount of Each Receipt this Period<br>301.36                  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>Con Ed Solutions Director, Business Development  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>301.36                            |  |

|   |  |   |  |
|---|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Robert Mennella</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 5 / 2 0 0 7 |  |
| Mailing Address 82 Sherwood Drive   |  | <b>Transaction ID: SA11A1.5428</b>                            |  |
| City State Zip Code<br>Ramsey NJ 07466  |  | Amount of Each Receipt this Period<br>300.00                  |  |
| FEC ID number of contributing federal political committee.<br>C   |  |   |  |
| Name of Employer Occupation<br>Con Ed Energy VP Commodity Management  |  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>300.00                            |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 3786.74 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 12 / 34                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

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

Mailing Address 7 Cook Close

City State Zip Code  
 Ridgefield CT 06877

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

Name of Employer Con Edison Occupation Senior VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 965.03

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2007

**Transaction ID:** SA11A1.5392

Amount of Each Receipt this Period  
 965.03

**B.** Full Name (Last, First, Middle Initial)  
 Dawson Newberry

Mailing Address 3 Antler Pine Rd

City State Zip Code  
 Sandy Hook CT 06482

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

Name of Employer Con Ed Energy Occupation Director of IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.32

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 15 / 2007

**Transaction ID:** SA11A1.5430

Amount of Each Receipt this Period  
 239.32

**C.** Full Name (Last, First, Middle Initial)  
 Nelson Perez

Mailing Address 176 East 81st Street Apt 4C

City State Zip Code  
 New York NY 10028

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

Name of Employer Con Edison Occupation Manager - Gov't Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 10 / 2007

**Transaction ID:** SA11A1.5400

Amount of Each Receipt this Period  
 300.00

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>1504.35</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

|  |  |              |
|--|--|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 13 / 34 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |  |
|---|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Stephen Quinn<br>Mailing Address 43 Rodcris Drive<br>City State Zip Code<br>Mahopac NY 10541<br>FEC ID number of contributing federal political committee. <b>C</b>                |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007<br><b>Transaction ID: SA11A1.5401</b><br>Amount of Each Receipt this Period<br>460.02 |
| Name of Employer<br>Con Edison<br>Occupation<br>Vice-President<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>460.02 |  |  |

|  |  |  |
|--|--|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Louis Rana<br>Mailing Address 62 Ridgewood Terrace<br>City State Zip Code<br>Chappaqua NY 11565<br>FEC ID number of contributing federal political committee. <b>C</b>                |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007<br><b>Transaction ID: SA11A1.5402</b><br>Amount of Each Receipt this Period<br>300.00 |
| Name of Employer<br>Con Edison<br>Occupation<br>President and COO<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>300.00 |  |  |

|  |  |  |
|--|--|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Frances Resheske<br>Mailing Address 150 Joralemeone Street<br>City State Zip Code<br>Brooklyn NY 11201<br>FEC ID number of contributing federal political committee. <b>C</b>             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007<br><b>Transaction ID: SA11A1.5404</b><br>Amount of Each Receipt this Period<br>970.02 |
| Name of Employer<br>Con Edison<br>Occupation<br>Senior Vice-President<br>Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>970.02 |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1730.04 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |              |
|--|---|--------------|
| Use separate schedule(s)<br>or each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 14 / 34 |
|  | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|  | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. John Shipman</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 34 Prospect Road  |  | <b>Transaction ID: SA11A1.5411</b>                       |  |
| City State Zip Code<br><b>Centerport NY 10566</b>   | Amount of Each Receipt this Period<br>246.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Engineer - Transportation Ops  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>246.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Saddle Smith</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 18 John Dorsey Drive  |  | <b>Transaction ID: SA11A1.5414</b>                       |  |
| City State Zip Code<br><b>Cortlandt NY 10566</b>  | Amount of Each Receipt this Period<br>465.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Associate General Counsel      |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>465.00           |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Luther Tai</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 38 Lancelot Lane  |  | <b>Transaction ID: SA11A1.5417</b>                       |  |
| City State Zip Code<br><b>Basking Ridge NY 07920</b>  | Amount of Each Receipt this Period<br>480.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  |  |  |
| Name of Employer<br>Con Edison  | Occupation<br>Senior Vice-President          |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>480.00           |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1191.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

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

|  |   |                              |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 15 / 34                 |
|  | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|  | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|  | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|  | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Thomas Uhl</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address 13 Buckingham Drive   |  | <b>Transaction ID: SA11A1.5419</b>                       |  |
| City State Zip Code<br>Ocean NJ 07712   |  | Amount of Each Receipt this Period<br>300.00             |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Con Edison Account Executive - Marketing & Sales   |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>300.00                       |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Charles Weliky</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 15 / 2007 |  |
| Mailing Address 50-47 185 St  |  | <b>Transaction ID: SA11A1.5432</b>                       |  |
| City State Zip Code<br>Fresh Meadows NY 11365   |  | Amount of Each Receipt this Period<br>720.00             |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Con Ed Energy President of CEE   |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>720.00                       |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Patrick Wheeler</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 10 / 2007 |  |
| Mailing Address Box 476 Front Street  |  | <b>Transaction ID: SA11A1.5420</b>                       |  |
| City State Zip Code<br>Crosswicks NJ 08515  |  | Amount of Each Receipt this Period<br>240.00             |  |
| FEC ID number of contributing federal political committee.<br>C   |  |  |  |
| Name of Employer Occupation<br>Con Edison Manager - Human Resources   |  |  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>240.00                       |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶           | 1260.00  |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | 22655.96 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 34

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Committee to Re-Elect Ed Towns</b>   |  | <b>Transaction ID:</b> SB23.5459<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 3 / 0 1 / 2 0 0 7 |
| Mailing Address 438 Lewis Ave   |  | Amount of Each Disbursement this Period<br>1000.00   |
| City Brooklyn State NY Zip Code 11233   |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Max Baucus</b>  |  | <b>Transaction ID:</b> SB23.5495<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 3 0 / 2 0 0 7 |
| Mailing Address 818 Connecticut Avenue, NW Suite 1100   |  | Amount of Each Disbursement this Period<br>1000.00   |
| City Washington DC State Zip Code 20006   |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rangel for Congress</b>  |  | <b>Transaction ID:</b> SB23.5519<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 8 / 2 0 0 7 |
| Mailing Address 40 West 135 Street  |  | Amount of Each Disbursement this Period<br>1000.00   |
| City New York State NY Zip Code 10037   |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | 3000.00 |



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Abbate for Assembly</b>   |   | <b>Transaction ID:</b> SB29.5460                         |
| Mailing Address PO Box 280235  |   | Date of Disbursement<br>MM / DD / YYYY<br>03 / 14 / 2007 |
| City<br>Brooklyn   | State<br>NY   | Zip Code<br>11228-0235                                   |
| Purpose of Disbursement  | Amount of Each Disbursement this Period<br>250.00   |  |
| Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Andrew Lanza for Staten Island</b>                                    |   | <b>Transaction ID:</b> SB29.5579                         |
| Mailing Address PO Box 352   |   | Date of Disbursement<br>MM / DD / YYYY<br>02 / 23 / 2007 |
| City<br>Staten Island  | State<br>NY   | Zip Code<br>10308  |
| Purpose of Disbursement  | Amount of Each Disbursement this Period<br>350.00   |  |
| Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Carrion NYC</b>   |   | <b>Transaction ID:</b> SB29.5507                         |
| Mailing Address 1640 Eastchester Road  |   | Date of Disbursement<br>MM / DD / YYYY<br>05 / 14 / 2007 |
| City<br>Bronx  | State<br>NY   | Zip Code<br>10461  |
| Purpose of Disbursement  | Amount of Each Disbursement this Period<br>1000.00  |  |
| Candidate Name   | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>1600.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |  |  |
|---|--|--|
| <p><b>A. Citizens for Dilan</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 370-0551</p> <p>City Brooklyn State NY Zip Code 11237</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5472</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>  |  |  |

|  |  |  |
|--|--|--|
| <p><b>B. Committee for Aubrey I. Pheffer</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8800 Shorefound Pkwy, 5-B</p> <p>City Rockaway Beach State NY Zip Code 11693</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5516</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|  |  |  |
|--|--|--|
| <p><b>C. Committee to Elect Assemblyman Jeffrion L. Aubry</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 861 Emmett Street</p> <p>City Schenectady State NY Zip Code 12307</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5524</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|   |   |
|---|---|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="1100.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Committee to Elect Margaret M. Markey</b>                             |  | <b>Transaction ID:</b> SB29.5521<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 8 / 2 0 0 7 |
| Mailing Address 88-05 69 Road<br>c/o Patrick Gorman  |  | Amount of Each Disbursement this Period<br>150.00  |
| City Forest Hills State NY Zip Code 11375  |  |  |
| Purpose of Disbursement  |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. David Weprin 2009</b>   |  | <b>Transaction ID:</b> SB29.5506<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 4 / 2 0 0 7 |
| Mailing Address c/o The Esler Group<br>420 Lexington Ave, Suite 555  |  | Amount of Each Disbursement this Period<br>500.00  |
| City New York State NY Zip Code 10170  |  |  |
| Purpose of Disbursement  |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Democratic Assembly Campaign Committee</b>                            |  | <b>Transaction ID:</b> SB29.5455<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 2 / 2 3 / 2 0 0 7 |
| Mailing Address 107 Washington Avenue<br>Suite 1LL   |  | Amount of Each Disbursement this Period<br>1000.00   |
| City Albany State NY Zip Code 12210  |  |  |
| Purpose of Disbursement  |  | Category/<br>Type  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1650.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>A. Democratic Senate Campaign Committee</b></p>  |   | <p><b>Transaction ID:</b> SB29.5563</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 1 | 4 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D      | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 3   |   | 1      | 4 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Mailing Address 107 Washington Avenue, 2nd fl</p>  |   | <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table>  | 500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>City Albany State NY Zip Code 12210</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Purpose of Disbursement</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Candidate Name</p>   |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>B. Frank Padavan Re-election Campaign Committee</b></p>                                    |   | <p><b>Transaction ID:</b> SB29.5566</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 1 | 6 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D      | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 3   |   | 1      | 6 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Mailing Address PO Box 7272</p>  |   | <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table>  | 500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>City Albany State NY Zip Code 12224</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Purpose of Disbursement</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Candidate Name</p>   |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Full Name (Last, First, Middle Initial)</p> <p><b>C. Frank Padavan Re-election Committee</b></p>   |   | <p><b>Transaction ID:</b> SB29.5522</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 1 | 8 |  | 2 | 0 | 0 | 7 |
| M   | M   | /   | D      | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 5   |   | 1      | 8 |   | 2 | 0 | 0 | 7 |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Mailing Address PO Box 7272</p>  |   | <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">500.00</td> </tr> </table>  | 500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 500.00  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>City Albany State NY Zip Code 12224</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Purpose of Disbursement</p>  |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Candidate Name</p>   |   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends for Fuschillo</b>   |   | <b>Transaction ID: SB29.5526</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 8 / 2 0 0 7 |
| Mailing Address PO Box 336   |   | Amount of Each Disbursement this Period<br>400.00  |
| City Merrick   | State NY Zip Code 11566   |  |
| Purpose of Disbursement  |   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends for the Election of Dean Skelos</b>                           |   | <b>Transaction ID: SB29.5436</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 1 / 1 9 / 2 0 0 7 |
| Mailing Address 31 Roxen Road  |   | Amount of Each Disbursement this Period<br>3000.00   |
| City Rockville Center  | State NY Zip Code 11570   |  |
| Purpose of Disbursement  |   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of Andrea Stewart-Cousins</b>                                 |   | <b>Transaction ID: SB29.5499</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 5 / 2 0 0 7 |
| Mailing Address 41 Union Square West, Suite 818  |   | Amount of Each Disbursement this Period<br>300.00  |
| City New York  | State NY Zip Code 10003   |  |
| Purpose of Disbursement  |   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |   |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 3700.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |         |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Assemblyman Jose Rivera</b>  |  | <b>Transaction ID:</b> SB29.5461<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 3 / 1 4 / 2 0 0 7 |
| Mailing Address PO Box 7301  |  | Amount of Each Disbursement this Period<br>300.00  |
| City Albany State NY Zip Code 12224  |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Bill de Blasio 2009</b>  |  | <b>Transaction ID:</b> SB29.5539<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 1 2 / 2 0 0 7 |
| Mailing Address 320 Seventh Avenue #278  |  | Amount of Each Disbursement this Period<br>350.00  |
| City Brooklyn State NY Zip Code 11215  |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of Felix Ortiz</b>  |  | <b>Transaction ID:</b> SB29.5486<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 7 |
| Mailing Address 356 Winter Street East<br>c/o Linda Buckley  |  | Amount of Each Disbursement this Period<br>350.00  |
| City Troy State NY Zip Code 12180  |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Inez Dickens 2009</b>   |  | <b>Transaction ID: SB29.5477</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 7 |
| Mailing Address 2155 Adam Clayton Powell Blvd.  |  | Amount of Each Disbursement this Period<br>250.00  |
| City New York State NY Zip Code 10027   |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Jim Wright</b>  |  | <b>Transaction ID: SB29.5483</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 7 |
| Mailing Address PO Box 704  |  | Amount of Each Disbursement this Period<br>400.00  |
| City Watertown State NY Zip Code 13601  |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of Jose Peralta</b>  |  | <b>Transaction ID: SB29.5481</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 7 |
| Mailing Address c/o Mirram Group<br>895 Broadway  |  | Amount of Each Disbursement this Period<br>250.00  |
| City New York State NY Zip Code 10003   |  |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 900.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Keith L.T. Wright</b>  |   | <b>Transaction ID: SB29.5479</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 2 / 2 0 0 7 |
| Mailing Address PO Box 4256<br>c/o Nancy Holmes  |   | Amount of Each Disbursement this Period<br>250.00  |
| City Albany State NY Zip Code 12204  |   |  |
| Purpose of Disbursement  | Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Kevin Parker</b>   |   | <b>Transaction ID: SB29.5569</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 2 / 0 9 / 2 0 0 7 |
| Mailing Address 551 E 55th Street  |   | Amount of Each Disbursement this Period<br>300.00  |
| City Brooklyn State NY Zip Code 11203  |   |  |
| Purpose of Disbursement  | Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of Marty Golden</b>   |   | <b>Transaction ID: SB29.5482</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 0 6 / 2 0 0 7 |
| Mailing Address 476 76th Street  |   | Amount of Each Disbursement this Period<br>500.00  |
| City Brooklyn State NY Zip Code 11209  |   |  |
| Purpose of Disbursement  | Category/<br>Type   |  |
| Candidate Name   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

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|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1050.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | _____   |



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Friends of Rhoda S. Jacobs</b>  |  | <b>Transaction ID: SB29.5537</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 1 2 / 2 0 0 7 |
| Mailing Address 109 Colonial Avenue  |  | Amount of Each Disbursement this Period<br>350.00  |
| City Albany State NY Zip Code 12203  |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Friends of Ruben Diaz, Jr.</b>  |  | <b>Transaction ID: SB29.5490</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 1 8 / 2 0 0 7 |
| Mailing Address PO Box 229   |  | Amount of Each Disbursement this Period<br>400.00  |
| City Bronx State NY Zip Code 10460   |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of Senator Libous Committee</b>   |  | <b>Transaction ID: SB29.5463</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 3 / 1 6 / 2 0 0 7 |
| Mailing Address 59-61 Court Street<br>PO Box 432   |  | Amount of Each Disbursement this Period<br>500.00  |
| City Binghamton State NY Zip Code 13902  |  |  |
| Purpose of Disbursement  | Category/Type  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |  |   |
|---|--|---|
| <p><b>A.</b> Friends of Senator Serphin R. Maltese</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 38</p> <p>City Middle Village State NY Zip Code 11379</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>        |  | <p><b>Transaction ID:</b> SB29.5441</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>  |
| <p><b>B.</b> Friends of Senator Serphin R. Maltese</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 38</p> <p>City Middle Village State NY Zip Code 11379</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>        |  | <p><b>Transaction ID:</b> SB29.5523</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> |
| <p><b>C.</b> Friends of Steven Cymbrowitz</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1311 Brightwater Avenue Apt 10J</p> <p>City Brooklyn State NY Zip Code 11235</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5573</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>  |

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| <p><b>A. Friends of Vito Lopez</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1436 Water's Edge Drive<br/>c/o Chris Fisher</p> <p>City Bayside State NY Zip Code 11360</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: SB29.5511</b></p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="400.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  |  | <p>Category/Type</p>   |

|   |  |  |
|---|--|--|
| <p><b>B. Gallagher New York</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 790187</p> <p>City Middle Village State NY Zip Code 11379</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: SB29.5514</b></p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>   |  | <p>Category/Type</p>   |

|  |  |  |
|--|--|--|
| <p><b>C. New Yorkers for Klein</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1614 Williamsbridge Road</p> <p>City Bronx State NY Zip Code 10461</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID: SB29.5484</b></p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>  |  | <p>Category/Type</p>   |

|   |  |
|---|--|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="950.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |  |   |
|---|--|---|
| <p><b>A. New Yorkers for Thompson</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 321 Broadway, Suite 201<br/>c/o Kasirer Consulting</p> <p>City New York State NY Zip Code 10007</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5509</p> <p>Date of Disbursement</p> <p><input type="text"/> 05 / <input type="text"/> 15 / <input type="text"/> 2007</p> <p>Amount of Each Disbursement this Period</p> <p><input type="text"/> 1000.00</p> |
|---|--|---|

|   |  |  |
|---|--|--|
| <p><b>B. Paterson for New York</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 420 Lexington Avenue, Suite 555<br/>c/o The Esler Group</p> <p>City New York State NY Zip Code 10170</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5504</p> <p>Date of Disbursement</p> <p><input type="text"/> 05 / <input type="text"/> 14 / <input type="text"/> 2007</p> <p>Amount of Each Disbursement this Period</p> <p><input type="text"/> 500.00</p> |
|---|--|--|

|   |  |  |
|---|--|--|
| <p><b>C. People for Bing</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 132 East 43 Street #243</p> <p>City New York State NY Zip Code 10017</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5475</p> <p>Date of Disbursement</p> <p><input type="text"/> 03 / <input type="text"/> 23 / <input type="text"/> 2007</p> <p>Amount of Each Disbursement this Period</p> <p><input type="text"/> 200.00</p> |
|---|--|--|

|   |                                     |
|---|-------------------------------------|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text"/> 1700.00</p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>         |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. People for Jeffries</b>   |   | <b>Transaction ID:</b> SB29.5493<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 4 / 2 3 / 2 0 0 7 |
| Mailing Address 481 Eighth Avenue, Suite 1202  |   | Amount of Each Disbursement this Period<br>250.00  |
| City New York State NY Zip Code 10001  |   |  |
| Purpose of Disbursement<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. People for John Liu</b>   |   | <b>Transaction ID:</b> SB29.5497<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 4 / 2 0 0 7 |
| Mailing Address 57 Mott Street, Suite 13<br>c/o Chung Seto   |   | Amount of Each Disbursement this Period<br>250.00  |
| City New York State NY Zip Code 10013  |   |  |
| Purpose of Disbursement<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. People for Leroy Comrie</b>   |   | <b>Transaction ID:</b> SB29.5532<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 9 / 2 0 0 7 |
| Mailing Address 305 Broadway, 9th Floor<br>c/o Chung Seto  |   | Amount of Each Disbursement this Period<br>500.00  |
| City New York State NY Zip Code 10007  |   |  |
| Purpose of Disbursement<br>Candidate Name  | Category/<br>Type   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Republican Assembly Campaign Committee</b>  |  | <b>Transaction ID: SB29.5453</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 2 / 2 3 / 2 0 0 7 |
| Mailing Address 315 State Street   |  | Amount of Each Disbursement this Period<br>500.00  |
| City Albany State NY Zip Code 12210  |  |  |
| Purpose of Disbursement<br>Candidate Name  | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Rivera 2009</b>   |  | <b>Transaction ID: SB29.5542</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 1 2 / 2 0 0 7 |
| Mailing Address PO Box 22942   |  | Amount of Each Disbursement this Period<br>500.00  |
| City Brooklyn State NY Zip Code 11202  |  |  |
| Purpose of Disbursement<br>Candidate Name  | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Rory Lancman Election Committee</b>   |  | <b>Transaction ID: SB29.5530</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 2 9 / 2 0 0 7 |
| Mailing Address 41 Union Square West, Suite 818  |  | Amount of Each Disbursement this Period<br>350.00  |
| City New York State NY Zip Code 10003  |  |  |
| Purpose of Disbursement<br>Candidate Name  | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |  |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 1350.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....   |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ruth Hassell-Thompson for State Senate</b>                            |  | <b>Transaction ID: SB29.5465</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 3 / 1 6 / 2 0 0 7 |
| Mailing Address PO Box 2444  |  | Amount of Each Disbursement this Period<br>350.00  |
| City Mount Vernon  | State NY Zip Code 10551  |  |
| Purpose of Disbursement  |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sabini for Senate</b>   |  | <b>Transaction ID: SB29.5538</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 1 2 / 2 0 0 7 |
| Mailing Address PO Box 938   |  | Amount of Each Disbursement this Period<br>300.00  |
| City Jackson Heights   | State NY Zip Code 11372  |  |
| Purpose of Disbursement  |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Savino for New York</b>   |  | <b>Transaction ID: SB29.5582</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 2 / 2 3 / 2 0 0 7 |
| Mailing Address 481 Eighth Avenue, Suite 1202  |  | Amount of Each Disbursement this Period<br>250.00  |
| City New York  | State NY Zip Code 10001  |  |
| Purpose of Disbursement  |  |  |
| Candidate Name   |  |  |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:   |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 900.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |        |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Shirley Huntley for State Senate</b>   |   | <b>Transaction ID: SB29.5502</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 4 / 2 0 0 7 |
| Mailing Address 120-23 171 Street   |   | Amount of Each Disbursement this Period<br>200.00  |
| City Jamica State NY Zip Code 11434   |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Category/Type |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Stewart 2008</b>   |   | <b>Transaction ID: SB29.5535</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 6 / 1 2 / 2 0 0 7 |
| Mailing Address 4016 Church Avenue  |   | Amount of Each Disbursement this Period<br>100.00  |
| City Brooklyn State NY Zip Code 11203   |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Category/Type |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. The Committee to Re-Elect George Onorato</b>   |   | <b>Transaction ID: SB29.5439</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 1 / 1 9 / 2 0 0 7 |
| Mailing Address P.O. Box 7175 Capitol Station   |   | Amount of Each Disbursement this Period<br>250.00  |
| City Albany State NY Zip Code 12224-0175  |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Category/Type |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 550.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | .....  |



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 34

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|  |  |  |
|--|--|--|
| <p><b>A. The Connor Committee</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 61 Pierrepont Street, Suite 71</p> <p>City Brooklyn State NY Zip Code 11201</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5491</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="125.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>   |  |  |

|   |  |  |
|---|--|--|
| <p><b>B. The Towns Committee</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 13 Crescent Street</p> <p>City Brooklyn State NY Zip Code 11208</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5488</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="600.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>  |  |  |

|   |  |  |
|---|--|--|
| <p><b>C. Tom Duane For Senate</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 80 Eighth Ave, Suite 1802</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> |  | <p><b>Transaction ID:</b> SB29.5501</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> |
| <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>  |  |  |

|   |   |
|---|---|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="1225.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

CONSOLIDATED EDISON INC EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Valesky for Senate</b>   |   | <b>Transaction ID: SB29.5528</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 8 / 2 0 0 7 |
| Mailing Address PO Box 624  |   | Amount of Each Disbursement this Period<br>250.00  |
| City Manlius State NY Zip Code 13104  |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Westchester Republican County Committee</b>  |   | <b>Transaction ID: SB29.5473</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 3 / 2 3 / 2 0 0 7 |
| Mailing Address 214 Mamaroneck Avenue   |   | Amount of Each Disbursement this Period<br>300.00  |
| City White Plains State NY Zip Code 10601   |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Zebrowski for Assembly</b>   |   | <b>Transaction ID: SB29.5517</b><br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>0 5 / 1 8 / 2 0 0 7 |
| Mailing Address 106 Strawtown Road<br>c/o Kristen Stavisky  |   | Amount of Each Disbursement this Period<br>250.00  |
| City West Nyack State NY Zip Code 10994   |   |  |
| Purpose of Disbursement<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| Category/Type   |   |  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>800.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | <b>23975.00</b> |