

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Kathleen Rice for Congress

ADDRESS (number and street)

PO Box 744

Check if different than previously reported. (ACC)

Mineola

NY

11501

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00555813

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NY

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11 /

08 /

2016

in the State of

NY

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

General (30G)

Runoff (30R)

Special (30S)

Election on

/

/

/

in the State of

5. Covering Period

10 /

01 /

2016

through

10 /

19 /

2016

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 May, Margaret, , ,

Signature of Treasurer May, Margaret, , ,

[Electronically Filed]

Date

10 /

27 /

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Kathleen Rice for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	26703.39	2014831.70
(b) Total Contribution Refunds (from Line 20(d))	0.00	14211.89
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	26703.39	2000619.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	189814.08	1603777.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	25995.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	189814.08	1577782.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	644466.63	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Kathleen Rice for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8420.00	1351393.96
(ii) Unitemized.....	1783.39	69510.49
(iii) TOTAL of contributions from individuals ▶	10203.39	1420904.45
(b) Political Party Committees.....	0.00	36.94
(c) Other Political Committees (such as PACs).....	16500.00	593890.31
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	26703.39	2014831.70
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	119521.50
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	25995.15
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	6.65
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	26703.39	2160355.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 26

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	189814.08	1603777.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	9211.89
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	14211.89
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	189814.08	1617989.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	807577.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	26703.39
25. SUBTOTAL (add Line 23 and Line 24).....	834280.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	189814.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	644466.63

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Andrews, Susan, , ,

Mailing Address PO Box 302
26 Freeport Ave

City Point Lookout State NY Zip Code 11569-0302

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

Name of Employer NAAP Occupation Program Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
365.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : **VNW3EEV2268**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Aurelio, Richard, , ,

Mailing Address 86 Cove Neck Rd

City Oyster Bay State NY Zip Code 11771-1820

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 03 / 2016

Transaction ID : **VNW3EEXT4Y5**

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
4247.29

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 09 / 2016

Transaction ID : **VNW3EEXT4Y5E**

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	350.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 26	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Behin, Ayanna, , ,

Mailing Address 130 Washington Ave

City Brooklyn	State NY	Zip Code 11205-2513
------------------	-------------	------------------------

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

Name of Employer Behin Literary Agency	Occupation Literary Agent
---	------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : VNW3EEXT612

Amount of Each Receipt this Period
25.00

Memo Item

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4247.29

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2016

Transaction ID : VNW3EEXT612E

Amount of Each Receipt this Period
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Bogard, David, , ,

Mailing Address 8 Saratoga St

City Lido Beach	State NY	Zip Code 11561-5114
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FEC ID number of contributing federal political committee. **C**

Name of Employer Bogard Justice Services, Inc.	Occupation Corrections Consultant
---	--------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : VNW3EEXT653

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶	125.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4247.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2016

Transaction ID : VNW3EEXT653E

Amount of Each Receipt this Period

100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Carl, Bernard, , ,

Mailing Address 216 Coopers Neck Ln

City Southampton	State NY	Zip Code 11968-4624
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Not Employed
-------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2016

Transaction ID : VNW3EEXT519

Amount of Each Receipt this Period

2700.00

Memo Item

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4247.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 09 / 2016

Transaction ID : VNW3EEXT519E

Amount of Each Receipt this Period

2700.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	2700.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
DelPizzo, Kate, , ,

Mailing Address 177 E 77th St
Apt 8A

City New York State NY Zip Code 10075-1920

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

Name of Employer HSS Occupation Doctor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 16 2016

Transaction ID : **VNW3EETWQZ3**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Friedman, Alfred, , ,

Mailing Address 736 Cryant Street

City Woodmere State NY Zip Code 11598

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

Name of Employer Rhodes New York Occupation President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 19 2016

Transaction ID : **VNW3EEXSWZ7**

Amount of Each Receipt this Period
1800.00

Memo Item

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

Mailing Address 62 Elinore Ave

City Merrick State NY Zip Code 11566-4214

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 13 2016

Transaction ID : **VNW3EEXT5P5**

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

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

2150.00

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

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

FOR LINE NUMBER: PAGE 9 OF 26
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City: West Somerville State: MA Zip Code: 02144-0031

FEC ID number of contributing federal political committee: **C** C00401224

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4247.29

Date of Receipt: 10 / 16 / 2016

Transaction ID : VNW3EEXT5P5E

Amount of Each Receipt this Period: 100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Plaut, Tova, , ,

Mailing Address 40 Kings Park Rd

City: Commack State: NY Zip Code: 11725-2426

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

Name of Employer: Occupation: teacher

Tree of Life Nursery School & Day Care

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
625.00

Date of Receipt: 10 / 18 / 2016

Transaction ID : VNW3EEXT5A0

Amount of Each Receipt this Period: 500.00

Memo Item

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

Mailing Address 118 Horseshoe Rd

City: Mill Neck State: NY Zip Code: 11765-1004

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

Name of Employer: Occupation: Chairman

Gain Capital Holdings, Inc.

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 10 / 18 / 2016

Transaction ID : VNW3EEXT5C6

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Rabinor, Irene, , ,

Mailing Address 8 Kensington St

City Lido Beach State NY Zip Code 11561-5104

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2016

Transaction ID : VNW3EESY772

Amount of Each Receipt this Period
 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Thibodeaux, Joyce, , ,

Mailing Address 113 Oakdale Loop

City Houma State LA Zip Code 70360-5932

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **252.14**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2016

Transaction ID : VNW3EEXT6N0

Amount of Each Receipt this Period
 25.00

Memo Item

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **4247.29**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2016

Transaction ID : VNW3EEXT6N0E

Amount of Each Receipt this Period
 25.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 26	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Thibodeaux, Joyce, , ,

Mailing Address 113 Oakdale Loop

City Houma	State LA	Zip Code 70360-5932
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Not Employed
-------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
252.14

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXT6W5

Amount of Each Receipt this Period
20.00

Memo Item

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
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Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4247.29

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXT6W5E

Amount of Each Receipt this Period
20.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 160 Broadway
Rm 708

City New York	State NY	Zip Code 10038-4216
------------------	-------------	------------------------

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

Name of Employer Tumelty & Spier, LLP	Occupation Attorney
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : VNW3EEV5N05

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1520.00
TOTAL This Period (last page this line number only).....▶	8420.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 26	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address 777 6th St NW
Ste 200

City Washington State DC Zip Code 20001-3707

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSVP3

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar Company Political Action Committee

Mailing Address 101 3rd St N

City Moorhead State MN Zip Code 56560-1990

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
15000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSX05

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
American Optometric Association Political Action Committee

Mailing Address 1505 Prince St
Ste 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSXR4

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 26	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
American Podiatric Medical Association Political Action Committee

Mailing Address 9312 Old Georgetown Rd

City Bethesda	State MD	Zip Code 20814-1621
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00008839

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2016

Transaction ID : VNW3EEXT4Q0

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CULAC the PAC of Credit Union National Association

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite 600

City Washington	State DC	Zip Code 20004-2620
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007880

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2016

Transaction ID : VNW3EEXT4V1

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Investment Company Institute Political Action Committee

Mailing Address 1401 H St NW
Ste 1200

City Washington	State DC	Zip Code 20005-2110
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00105981

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSX38

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 26	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Microsoft Corporation Political Action Committee

Mailing Address 16011 NE 36th Way
97017

City Redmond	State WA	Zip Code 98052-6301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSXS2

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TargetCitizens Political Forum

Mailing Address 1000 Nicollet Mall
TPN 1101

City Minneapolis	State MN	Zip Code 55403-2542
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00098061

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

Transaction ID : VNW3EEXSXV8

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
United Parcel Inc. PAC

Mailing Address 55 Glenlake Pkwy

City Atlanta	State GA	Zip Code 30328-3498
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

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

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 12 / 2016

Transaction ID : VNW3EEXT4S6

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
TOTAL This Period (last page this line number only)..... ▶	16500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2016		
Mailing Address 366 Summer St			FEC Identification Number C		
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Disbursement this Period 177.07		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type	Transaction ID : VNV469TP3M8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016		
Mailing Address 366 Summer St			FEC Identification Number C		
City Somerville	State MA	Zip Code 02144-3132	Amount of Each Disbursement this Period 121.68		
Purpose of Disbursement Credit Card Processing Fees		Category/ Type	Transaction ID : VNV469TTQP8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. ADT Security Services, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 1 Town Center Rd			FEC Identification Number C		
City Boca Raton	State FL	Zip Code 33486-1039	Amount of Each Disbursement this Period 86.88		
Purpose of Disbursement Office Security System		Category/ Type	Transaction ID : VNV469TM6C6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	385.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. Carefirst Blue Cross Blue Shield

Full Name (Last, First, Middle Initial)

Mailing Address 840 1st St NE
Union Center Plaza

City Washington State DC Zip Code 20065-0003

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 12 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 387.36

Transaction ID : VNV469TTQD6

Memo Item

B. Dropbox

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St
Ste 400

City San Francisco State CA Zip Code 94107-1725

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 07 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 9.99

Transaction ID : VNV469TPW03

Memo Item

c. First Data

Full Name (Last, First, Middle Initial)

Mailing Address 5565 Glenridge Connector NE
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 03 / 2016

FEC Identification Number C

Amount of Each Disbursement this Period 319.93

Transaction ID : VNV469TP3H5

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 717.28

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 10 / 03 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 478.32
Transaction ID : VNV469TP3J3
 Memo Item

B. Global Strategy Group

Full Name (Last, First, Middle Initial)
Mailing Address 895 Broadway Fl 5
City New York State NY Zip Code 10003-1226
Purpose of Disbursement Polling
Candidate Name
Office Sought: House Senate President Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 10 / 12 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 13500.00
Transaction ID : VNV469TTQH8
 Memo Item

c. League of Conservation Voters Action Fund

Full Name (Last, First, Middle Initial)
Mailing Address 1920 L St NW Ste 800
City Washington State DC Zip Code 20036-5045
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President Disbursement For: 2016
 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 10 / 03 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 213.30
Transaction ID : VNV469TPVZ5
 Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 14191.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Mandate Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address PO Box 80151		FEC Identification Number C
City Portland	State OR	Zip Code 97280-1151
Purpose of Disbursement Consultant - Strategy	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 9100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TM6A1
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Mandate Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016
Mailing Address PO Box 80151		FEC Identification Number C
City Portland	State OR	Zip Code 97280-1151
Purpose of Disbursement Consultant - Strategy	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2200.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TWST0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. May, Margaret, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 151 Linden Rd		FEC Identification Number C
City Mineola	State NY	Zip Code 11501-1519
Purpose of Disbursement Consultant - Compliance	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TX864
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	13050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Next Level Partners, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016		
Mailing Address 410 1st St SE Ste 310			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1866	Amount of Each Disbursement this Period 2750.00		
Purpose of Disbursement Consultant - Compliance		Category/ Type	Transaction ID : VNV469TP3D3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Next Level Partners, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016		
Mailing Address 410 1st St SE Ste 310			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1866	Amount of Each Disbursement this Period 391.86		
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : VNV469TP3G7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016		
Mailing Address 911 Panorama Trl S			FEC Identification Number C		
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period 6092.79		
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNV469TTQS1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	9234.65
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Kramer, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 2856 Rockaway Ave			FEC Identification Number C	
City Oceanside	State NY	Zip Code 11572-1017	Amount of Each Disbursement this Period 2253.70	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNV469TTQZ9	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Lamb, Coleman, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 139 S Kensington Ave Fl 2			FEC Identification Number C	
City Rockville Centre	State NY	Zip Code 11570-5615	Amount of Each Disbursement this Period 606.59	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNV469TTR30	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Reilly, Nell, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 1401 S St NW Apt 621			FEC Identification Number C	
City Washington	State DC	Zip Code 20009-5988	Amount of Each Disbursement this Period 606.59	
Purpose of Disbursement Payroll		Category/ Type 002	Transaction ID : VNV469TTR98	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Walsh, Amanda, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 42 Hilton Ave			FEC Identification Number C	
City Garden City	State NY	Zip Code 11530-4428	Amount of Each Disbursement this Period 594.10	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : VNV469TTR64	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Wise, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 9143 Cranesbill Trace Apt 515			FEC Identification Number C	
City Prospect	State KY	Zip Code 40059	Amount of Each Disbursement this Period 2031.81	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNV469TTRA6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 911 Panorama Trl S			FEC Identification Number C	
City Rochester	State NY	Zip Code 14625-2396	Amount of Each Disbursement this Period 3142.63	
Purpose of Disbursement Payroll - Taxes		Category/ Type	Transaction ID : VNV469TTRE7	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3142.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016
Mailing Address 911 Panorama Trl S		FEC Identification Number C
City Rochester	State NY	Zip Code 14625-2396
Purpose of Disbursement Payroll - Invoice		Amount of Each Disbursement this Period 84.25
Candidate Name		Transaction ID : VNV469TTRG3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Plancher, Chase, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address 1542 Laurel Hollow Rd		FEC Identification Number C
City Syosset	State NY	Zip Code 11791-9635
Purpose of Disbursement Reimbursement (Vendors that Aggregate Over \$200 Listed Below)		Amount of Each Disbursement this Period 270.60
Candidate Name		Transaction ID : VNV469TWSW6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016
Mailing Address 1250 Old Country Rd		FEC Identification Number C
City Westbury	State NY	Zip Code 11590-5624
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 206.60
Candidate Name		Transaction ID : VNV469TWSX4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	354.85
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. SKD Knickerbocker			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address 594 Broadway Rm 805			FEC Identification Number C	
City New York	State NY	Zip Code 10012-3257	Amount of Each Disbursement this Period 31834.00	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : VNV469TP3K0	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SKD Knickerbocker			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016	
Mailing Address 594 Broadway Rm 805			FEC Identification Number C	
City New York	State NY	Zip Code 10012-3257	Amount of Each Disbursement this Period 62793.00	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : VNV469TTPZ6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. SKD Knickerbocker			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016	
Mailing Address 594 Broadway Rm 805			FEC Identification Number C	
City New York	State NY	Zip Code 10012-3257	Amount of Each Disbursement this Period 40292.00	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : VNV469TTRJ9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	134919.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Storage Quarters Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 999 Stewart Ave		FEC Identification Number C
City Garden City	State NY	Zip Code 11530-4929
Purpose of Disbursement Storage Unit Rental	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 139.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TP3C5
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. The Frost Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016
Mailing Address 3701 Porter St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20016-3103
Purpose of Disbursement Consultant - Fundraising	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TP3Q2
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. The Frost Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016
Mailing Address 3701 Porter St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20016-3103
Purpose of Disbursement Reimbursement (Vendors that Aggregate Over \$200 Listed Below)	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1040.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNV469TP3R8
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5179.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Bistro Cacao			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address 320 Massachusetts Ave NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-5702	Amount of Each Disbursement this Period 1040.00	
Purpose of Disbursement Event Space and Catering		Category/ Type	Transaction ID : VNV469TP3S6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Jewish Home			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016	
Mailing Address PO Box 266			FEC Identification Number C	
City Lawrence	State NY	Zip Code 11559-0266	Amount of Each Disbursement this Period 225.00	
Purpose of Disbursement Advertising - Print		Category/ Type	Transaction ID : VNV469TP3E1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. The Jewish Star, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address 2 Endo Blvd			FEC Identification Number C	
City Garden City	State NY	Zip Code 11530-6707	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Print Advertisement		Category/ Type	Transaction ID : VNV469TP3P4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. The New York Times		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2016
Mailing Address O P # 371456		FEC Identification Number C
City Pittsburgh	State PA	Zip Code 15250-0001
Purpose of Disbursement Subscription		Amount of Each Disbursement this Period 37.01
Candidate Name	Category/ Type	Transaction ID : VNV469TTPY8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2016
Mailing Address 30 Broad St		FEC Identification Number C
City New York	State NY	Zip Code 10004-2909
Purpose of Disbursement Consultant - Fundraising		Amount of Each Disbursement this Period 8000.00
Candidate Name	Category/ Type	Transaction ID : VNV469TWB72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	8037.01
TOTAL This Period (last page this line number only).....▶	189686.67