

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 New York State Democratic Committee

ADDRESS (number and street) 120 Broadway, 32nd Floor New York NY 10271 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00143230 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 27 / 2012 through 12 / 31 / 2012

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 John Gulino

Signature of Treasurer John Gulino [Electronically Filed] Date 01 / 31 / 2013

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**New York State Democratic Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="41570.24"/>	<input type="text" value="41570.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="289299.22"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="139267.24"/>	<input type="text" value="5700966.66"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="428566.46"/>	<input type="text" value="5742536.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="341423.53"/>	<input type="text" value="5655393.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="87142.93"/>	<input type="text" value="87142.93"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="24613.55"/>	

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

**New York State Democratic Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9850.00	395423.70
(ii) Unitemized .....	255.00	17630.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10105.00	413054.40
(b) Political Party Committees .....	0.00	5850.00
(c) Other Political Committees (such as PACs).....	16000.00	346008.55
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	26105.00	764912.95
12. Transfers From Affiliated/Other Party Committees.....	45312.22	3969484.41
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	66408.35
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1.13	292196.06
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	67848.89	607964.89
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	67848.89	607964.89
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	139267.24	5700966.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	71418.35	5093001.77

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	32571.43	324985.68
(ii) Non-Federal Share.....	57904.79	638888.78
(b) Other Federal Operating Expenditures .....	89865.35	438377.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	180341.57	1402252.39
22. Transfers to Affiliated/Other Party Committees.....	93073.44	93073.44
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	86159.30
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	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements .....	0.00	143025.70
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .....	68008.52	3925883.14
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	68008.52	3925883.14
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	341423.53	5655393.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	283518.74	5016505.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	26105.00	764912.95
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26105.00	759912.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	122436.78	763363.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	66408.35
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	122436.78	696955.26

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: F3XN  
Transaction ID :

Please be advised that the wages reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and, as such, these wages can be paid as administrative expenses. Fringe benefits may continue to be reported on Schedule H4.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

**A. 501 West 41st St Associates LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One Bryant Park 49th Fl  
 City New York State NY Zip Code 10036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : C4618571**  
 Amount of Each Receipt this Period  
 5000.00

**B. Thomas Battistoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 334 Heathcote Road  
 City Scarsdale State NY Zip Code 10583  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Schiff Hardin LLP Attorney  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2012  
**Transaction ID : C4618552**  
 Amount of Each Receipt this Period  
 250.00

**c. Alan Cole**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 Todd Rd  
 City Katonah State NY Zip Code 10536-2512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : C4618573**  
 Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 110
	<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)  
**New York State Democratic Committee**

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

Mailing Address 16060 Ventura Blvd., Ste 105 / PMB

City	State	Zip Code
Encino	CA	91436

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

Name of Employer	Occupation
Sound Factory	CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

**Transaction ID : C4618641**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 420 Webster Ave.

City	State	Zip Code
New Rochelle	NY	10801-3224

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

Name of Employer	Occupation
None	Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2012

**Transaction ID : C4619300**

Amount of Each Receipt this Period  
250.00

**C. Robbin M. Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 922 Avalon Court Drive

City	State	Zip Code
Melville	NY	11747

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

Name of Employer	Occupation
Meridian	Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

**Transaction ID : C4618665**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 110
	<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)  
**New York State Democratic Committee**

**A. Helen Lowenstein**  
Full Name (Last, First, Middle Initial)

Mailing Address Five Oak Lane

City Larchmont State NY Zip Code 10538

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

Name of Employer Self Employed Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
11 / 30 / 2012  
**Transaction ID : C4618648**

Amount of Each Receipt this Period  
1000.00

**B. Alan Menken**  
Full Name (Last, First, Middle Initial)

Mailing Address c/o J.H. Cohn LLP  
1212 Avenue of the Americas

City New York State NY Zip Code 10036

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
11 / 30 / 2012  
**Transaction ID : C4618577**

Amount of Each Receipt this Period  
250.00

**C. Bridget Moore**  
Full Name (Last, First, Middle Initial)

Mailing Address 302 West 86th Street

City New York State NY Zip Code 10024

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

Name of Employer DC Moore Gallery Occupation Gallerist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
12 / 20 / 2012  
**Transaction ID : C4619301**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 110  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. Sherif Moussa**

Mailing Address 319 East 50th Street, Apt 3B

City State Zip Code  
 New York NY 10022

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

Name of Employer Occupation  
 BMC Group Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2012  
**Transaction ID : C4618664**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 21 Ashland Avenue

City State Zip Code  
 Pleasantville NY 10570

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

Name of Employer Occupation  
 Dewey & LeBoeuf Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2012  
**Transaction ID : C4618663**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**C. Amy R. Paulin**

Mailing Address 12 Burgess Rd

City State Zip Code  
 Scarsdale NY 10583

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

Name of Employer Occupation  
 NYS Assembly Assemblywoman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : C4618649**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. BOILMAKERS-BLACKSMITHS LEGISLATIVE EDUCATION-ACTIO**

Mailing Address 753 STATE AVENUE SUITE 565

City KANSAS CITY	State KS	Zip Code 66101
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C70002506

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

**Transaction ID : C4618572**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN P**

Mailing Address 1370 Ontario St

City Cleveland	State OH	Zip Code 44113
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FEC ID number of contributing federal political committee. **C** C00099234

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2012

**Transaction ID : C4618668**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS L**

Mailing Address 16 COURT STREET 4TH FLOOR

City BROOKLYN	State NY	Zip Code 11241
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00355818

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

**Transaction ID : C4618640**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 110  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**New York State Democratic Committee**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL POSTAL MAIL HANDLERS UNION - DIVISION OF LABORERS' INTL UNION OF NORTH AMERICA

Mailing Address 905 16TH ST., NW  
SECOND FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00345306

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2012

**Transaction ID : C4618598**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. JOSE ABELLAR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 201 W 21ST ST APT 14B

City NEW YORK	State NY	Zip Code 10011
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FEC ID number of contributing federal political committee. **C**

Name of Employer CARTERS INC	Occupation FASHION DESIGNER
---------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2012  
**Transaction ID : C4630810**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B. LOIS AFFLERBACH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4032 166TH ST

City FLUSHING	State NY	Zip Code 11358
------------------	-------------	-------------------

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

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 19 / 2012  
**Transaction ID : C4630811**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C. Husam U. Ahmad**  
Full Name (Last, First, Middle Initial)  
Mailing Address 55 Wendover Rd.

City Forest Hills	State NY	Zip Code 11375
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FEC ID number of contributing federal political committee. **C**

Name of Employer HAKS	Occupation Engineer
--------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012  
**Transaction ID : C4630899**

Amount of Each Receipt this Period  
950.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

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

Mailing Address 23 Old Lyme Rd

City Pittsford State NY Zip Code 14534

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

Name of Employer KJT Group Occupation Marketing Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 19 / 2012  
**Transaction ID : C4630812**

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B. Marian Bellamy**  
Full Name (Last, First, Middle Initial)

Mailing Address 1575 Odell St Apt 1B

City Bronx State NY Zip Code 10462

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

Name of Employer N/A Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : C4630900**

Amount of Each Receipt this Period 190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C. Joanne Boger**  
Full Name (Last, First, Middle Initial)

Mailing Address 402 7th St

City Brooklyn State NY Zip Code 11215

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

Name of Employer Community Access Occupation Property Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012  
**Transaction ID : C4630813**

Amount of Each Receipt this Period 252.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. HARRIET BRITTAIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 135 WARREN RD  
City ITHACA State NY Zip Code 14850  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt 10 / 29 / 2012  
**Transaction ID : C4630814**  
Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
\* Dollars for Democrats

**B. Richard P Brown**  
Full Name (Last, First, Middle Initial)  
Mailing Address 86 Sherry Ln  
City Kingston State NY Zip Code 12401  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Psychiatrist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 95.00

Date of Receipt 10 / 16 / 2012  
**Transaction ID : C4630902**  
Amount of Each Receipt this Period 95.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**C. Domenic Ciannella**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 586  
City Great River State NY Zip Code 11739-0586  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Episcopal Church Occupation Clergyman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 30 / 2012  
**Transaction ID : C4630903**  
Amount of Each Receipt this Period 285.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. Jerilyn Clark</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2012 <b>Transaction ID : C4630816</b>
Mailing Address 2726 Gulf Rd		Amount of Each Receipt this Period 100.00
City Varysburg	State NY	Zip Code 14167
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b> * Dollars for Democrats
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Cornwall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2012 <b>Transaction ID : C4630904</b>
Mailing Address 221 E 54th St		Amount of Each Receipt this Period 190.00
City Brooklyn	State NY	Zip Code 11203
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b> * NY Party Victory Fund
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Cospers</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2012 <b>Transaction ID : C4630905</b>
Mailing Address 15 Seacliff Lane		Amount of Each Receipt this Period 475.00
City Miller Place	State NY	Zip Code 11764-0729
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b> * NY Party Victory Fund
Name of Employer Casper Environmental	Occupation Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

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

Mailing Address **PO Box 2093**

City **Sag Harbor** State **NY** Zip Code **11963**

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

Name of Employer **Self Employed** Occupation **Builder**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : C4630906**

Amount of Each Receipt this Period **190.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address **430 South Capitol Street SE  
2nd Floor**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00000935**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2803233.48**

Date of Receipt **12 / 21 / 2012**

**Transaction ID : C4635466**

Amount of Each Receipt this Period **29972.22**

In-Kind: Deployment Related Expenses

Full Name (Last, First, Middle Initial)  
**C. Democratic National Committee**

Mailing Address **430 South Capitol Street, SE**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00010603**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **494250.04**

Date of Receipt **11 / 30 / 2012**

**Transaction ID : C4630637**

Amount of Each Receipt this Period **3220.00**

In-Kind: On-Line Voter File Access

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>33192.22</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. Democratic National Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2012 <b>Transaction ID : C4630640</b>
Mailing Address 430 South Capitol Street, SE		Amount of Each Receipt this Period 3220.00
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. <b>C</b> C00010603		In-Kind: On-Line Voter File Access
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494250.04	

Full Name (Last, First, Middle Initial) <b>B. Democratic National Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2012 <b>Transaction ID : C4630949</b>
Mailing Address 430 South Capitol Street, SE		Amount of Each Receipt this Period 18657.20
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. <b>C</b> C00010603		<b>[MEMO ITEM]</b> * NY Party Victory Fund Unitemized
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494250.04	

Full Name (Last, First, Middle Initial) <b>C. Ramon D. Desposito</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2012 <b>Transaction ID : C4630907</b>
Mailing Address 3410 28th Avenue, Apt. 3B		Amount of Each Receipt this Period 190.00
City Astoria	State NY	Zip Code 11103
FEC ID number of contributing federal political committee. <b>C</b>		<b>[MEMO ITEM]</b> * NY Party Victory Fund
Name of Employer	Occupation	
N/A	Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. Charles Diggs</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012
Mailing Address 25 Lefferts Ave Apt 3V		<b>Transaction ID : C4630908</b>
City Brooklyn	State NY	Zip Code 11225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 142.50
Name of Employer Macy's	Occupation Receiving Clerk	<b>[MEMO ITEM]</b> * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 142.50	

Full Name (Last, First, Middle Initial) <b>B. Dollars For Democrats</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2012
Mailing Address 430 South Capitol Street, SE		<b>Transaction ID : C4630898</b>
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00073791		Amount of Each Receipt this Period 26304.16
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * Dollars for Democrats Unitemized
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 151410.99	

Full Name (Last, First, Middle Initial) <b>C. PATRICIA DVORAK</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 19 / 2012
Mailing Address 18 WOLFERT AVE		<b>Transaction ID : C4630818</b>
City MENANDS	State NY	Zip Code 12204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer N/A	Occupation RETIRED	<b>[MEMO ITEM]</b> * Dollars for Democrats
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. PATRICIA DVORAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 WOLFERT AVE

City MENANDS State NY Zip Code 12204

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

Name of Employer N/A Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2012

**Transaction ID : C4630819**

Amount of Each Receipt this Period  
 25.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B. PATRICIA DVORAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 WOLFERT AVE

City MENANDS State NY Zip Code 12204

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

Name of Employer N/A Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2012

**Transaction ID : C4630820**

Amount of Each Receipt this Period  
 25.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C. HOLLIS ERB**  
Full Name (Last, First, Middle Initial)

Mailing Address 118 SNYDER HILL RD

City ITHACA State NY Zip Code 14850

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

Name of Employer CORNELL UNIVERSITY Occupation VETERINARIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2012

**Transaction ID : C4630821**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **0.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Janice Farmer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13811 219th St  
City Laurelton State NY Zip Code 11413  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pomenox Home Service Occupation Home Attendant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 190.00

Date of Receipt 10 / 15 / 2012  
Transaction ID : **C4630910**  
Amount of Each Receipt this Period 190.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**B. Bernice Fox**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2550 Olinville Ave Apt 5K  
City Bronx State NY Zip Code 10467  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt 11 / 19 / 2012  
Transaction ID : **C4630822**  
Amount of Each Receipt this Period 25.00  
**[MEMO ITEM]**  
\* Dollars for Democrats

**C. Bernice Fox**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2550 Olinville Ave Apt 5K  
City Bronx State NY Zip Code 10467  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 50.00

Date of Receipt 12 / 31 / 2012  
Transaction ID : **C4630823**  
Amount of Each Receipt this Period 25.00  
**[MEMO ITEM]**  
\* Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. BEATRICE Frank**

Mailing Address 262 Central Park W  
Apt 12c

City NEW YORK State NY Zip Code 10024-3512

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
11 / 19 / 2012  
**Transaction ID : C4630829**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
\* Dollars for Democrats

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

Mailing Address 12 Old Mamaroneck Rd.,  
Apt. 5D

City WHITE PLAINS State NY Zip Code 10605-2037

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

Name of Employer SELF EMPLOYED Occupation SOCIAL WORK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
12 / 04 / 2012  
**Transaction ID : C4630842**

Amount of Each Receipt this Period  
30.00

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**C. MICHAEL Friedman**

Mailing Address 12 Old Mamaroneck Rd.,  
Apt. 5D

City WHITE PLAINS State NY Zip Code 10605-2037

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

Name of Employer SELF EMPLOYED Occupation SOCIAL WORK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
12 / 17 / 2012  
**Transaction ID : C4630845**

Amount of Each Receipt this Period  
30.00

**[MEMO ITEM]**  
\* Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Muriel Gottesman**  
Full Name (Last, First, Middle Initial)

Mailing Address 87 Bayview Ave

City Northport State NY Zip Code 11768

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1425.00**

Date of Receipt  
 /  /   
**10 / 11 / 2012**

**Transaction ID : C4630911**

Amount of Each Receipt this Period  
 **475.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

**B. Kathyleen S Guarnier**  
Full Name (Last, First, Middle Initial)

Mailing Address 1365 Van Antwerp Rd #C28

City Schenectady State NY Zip Code 12309-4441

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.50**

Date of Receipt  
 /  /   
**10 / 09 / 2012**

**Transaction ID : C4630912**

Amount of Each Receipt this Period  
 **95.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

**C. Kathyleen S Guarnier**  
Full Name (Last, First, Middle Initial)

Mailing Address 1365 Van Antwerp Rd #C28

City Schenectady State NY Zip Code 12309-4441

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **826.50**

Date of Receipt  
 /  /   
**11 / 05 / 2012**

**Transaction ID : C4630913**

Amount of Each Receipt this Period  
 **19.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text"/> <b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Kathyleen S Guarnier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1365 Van Antwerp Rd #C28  
 City Schenectady State NY Zip Code 12309-4441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.50

Date of Receipt 11 / 30 / 2012  
**Transaction ID : C4630914**  
 Amount of Each Receipt this Period 47.50  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**B. Arelen Handel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 145 Bayview Ave  
 City Northport State NY Zip Code 11768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Information Requested Occupation Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 06 / 2012  
**Transaction ID : C4630915**  
 Amount of Each Receipt this Period 950.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**C. Esther Hardison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3895 Ransomville Rd  
 City Ransomville State NY Zip Code 14131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 11 / 19 / 2012  
**Transaction ID : C4630859**  
 Amount of Each Receipt this Period 50.00  
**[MEMO ITEM]**  
 \* Dollars for Democrats

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. Carlyle Harris</b>		Date of Receipt 10 / 11 / 2012 <b>Transaction ID : C4630916</b>
Mailing Address 230 E 39th St		Amount of Each Receipt this Period 95.00
City Brooklyn	State NY	Zip Code 11203
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> * NY Party Victory Fund
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 95.00	

Full Name (Last, First, Middle Initial) <b>B. NATALIE HAUPTMAN</b>		Date of Receipt 10 / 25 / 2012 <b>Transaction ID : C4630863</b>
Mailing Address 606 W 116TH ST APT 101		Amount of Each Receipt this Period 223.00
City NEW YORK	State NY	Zip Code 10027
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> * Dollars for Democrats
Name of Employer MANHATTAN SCHOOL OF MUSIC	Occupation TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.00	

Full Name (Last, First, Middle Initial) <b>C. Aysa Hazak</b>		Date of Receipt 11 / 02 / 2012 <b>Transaction ID : C4630917</b>
Mailing Address 433 E 56th St Apt 6A		Amount of Each Receipt this Period 47.50
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b> * NY Party Victory Fund
Name of Employer Retired	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.75	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Peter Heilbronner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 395 Riverside Dr Apt 9A  
City New York State NY Zip Code 10025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Neurology of Bergen County Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 18 / 2012  
Transaction ID : **C4630866**  
Amount of Each Receipt this Period 200.00  
**[MEMO ITEM]**  
\* Dollars for Democrats

**B. Lisina Hoch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 39 Matthiessen Park N  
City Irvington State NY Zip Code 10533-1512  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 975.00

Date of Receipt 10 / 16 / 2012  
Transaction ID : **C4630918**  
Amount of Each Receipt this Period 475.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**C. HOYER FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 700 13TH STREET, NW SUITE 600  
City WASHINGTON State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00140715  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 18864.28

Date of Receipt 11 / 30 / 2012  
Transaction ID : **C4618574**  
Amount of Each Receipt this Period 5000.00  
Transfer

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. Linely Baptiste Hurst**

Mailing Address 387 Adelphi Street Apt C

City Brooklyn	State NY	Zip Code 11238
------------------	-------------	-------------------

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

Name of Employer Visiting Nurse Assoc	Occupation Nurse
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **95.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

**Transaction ID : C4630920**

Amount of Each Receipt this Period  

95.00
-------

**[MEMO ITEM]**  
\* NY Party Victory Fund

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

Mailing Address 4210 82nd St Apt 5J

City Elmhurst	State NY	Zip Code 11373
------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **95.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2012

**Transaction ID : C4630921**

Amount of Each Receipt this Period  

95.00
-------

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**C. Lennox M Johnston**

Mailing Address 3207 Throop Ave

City Bronx	State NY	Zip Code 10469-5012
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **427.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2012

**Transaction ID : C4630922**

Amount of Each Receipt this Period  

95.00
-------

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. EUGENE JOSEPH**  
Full Name (Last, First, Middle Initial)

Mailing Address 132 WEDGEWOOD DR

City CORAM State NY Zip Code 11727

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

Name of Employer MOTOROLA SOLUTIONS INC Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 15 / 2012

**Transaction ID : C4630867**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**B. EUGENE JOSEPH**  
Full Name (Last, First, Middle Initial)

Mailing Address 132 WEDGEWOOD DR

City CORAM State NY Zip Code 11727

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

Name of Employer MOTOROLA SOLUTIONS INC Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 11 / 19 / 2012

**Transaction ID : C4630876**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars for Democrats

**C. STANLEY KATZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 75 E 190TH ST APT 4C

City BRONX State NY Zip Code 10468

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

Name of Employer N/A Occupation Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 15 / 2012

**Transaction ID : C4630877**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
\* Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. STANLEY KATZ**

Mailing Address **75 E 190TH ST APT 4C**

City <b>BRONX</b>	State <b>NY</b>	Zip Code <b>10468</b>
----------------------	--------------------	--------------------------

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

Name of Employer <b>N/A</b>	Occupation Requested
--------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2012

**Transaction ID : C4630879**

Amount of Each Receipt this Period  

25.00
-------

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**B. STANLEY KATZ**

Mailing Address **75 E 190TH ST APT 4C**

City <b>BRONX</b>	State <b>NY</b>	Zip Code <b>10468</b>
----------------------	--------------------	--------------------------

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

Name of Employer <b>N/A</b>	Occupation Requested
--------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2012

**Transaction ID : C4630880**

Amount of Each Receipt this Period  

25.00
-------

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**c. Henry E Kennedy**

Mailing Address **18 S 27th St**

City <b>Wyandanch</b>	State <b>NY</b>	Zip Code <b>11798</b>
--------------------------	--------------------	--------------------------

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

Name of Employer <b>Acme Bus Co</b>	Occupation <b>Bus Driver</b>
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

**Transaction ID : C4630923**

Amount of Each Receipt this Period  

285.00
--------

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. Baroukh Kodsí</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2012
Mailing Address 118 Girard St		<b>Transaction ID : C4630925</b>
City Brooklyn	State NY	Zip Code 11235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.50
Name of Employer Self Employed	Occupation Physician	<b>[MEMO ITEM]</b> * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 47.50	

Full Name (Last, First, Middle Initial) <b>B. Ann Learman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2012
Mailing Address 541 Lynbrook Ave		<b>Transaction ID : C4630926</b>
City Tonawanda	State NY	Zip Code 14150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer N/A	Occupation Retired	<b>[MEMO ITEM]</b> * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

Full Name (Last, First, Middle Initial) <b>C. Marguerite S. Lederberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012
Mailing Address 504 E. 63rd St Apt 32P		<b>Transaction ID : C4630927</b>
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 190.00
Name of Employer Memorial Sloan Kettering	Occupation Physician	<b>[MEMO ITEM]</b> * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. Roy Letsen**

Mailing Address 828 S Broadway

City State Zip Code  
Tarrytown NY 10591

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
47.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2012

Transaction ID : **C4630928**

Amount of Each Receipt this Period  
47.50

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**B. Juanita T Levell**

Mailing Address 18 Verona Pl

City State Zip Code  
Brooklyn NY 11216

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2012

Transaction ID : **C4630929**

Amount of Each Receipt this Period  
237.50

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**C. Anthony J Leventhal**

Mailing Address 251 Montrose Avenue

City State Zip Code  
Brooklyn NY 11206

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

Name of Employer Occupation  
Morrell & Company Warehouse Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2012

Transaction ID : **C4630930**

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. BERTRAM A Levy**

Mailing Address 652 E 229th St Apt 1F

City BRONX State NY Zip Code 10466-3856

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

Name of Employer LETTERLIES LOB Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : C4630931**

Amount of Each Receipt this Period  
190.00

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**B. Elaine Lipkowitz**

Mailing Address 1280 Old Route 17

City Ferndale State NY Zip Code 12734

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

Name of Employer Self Employed Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2012

**Transaction ID : C4630882**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**C. LOUISE SLAUGHTER RE-ELECTION COMMITTEE**

Mailing Address P.O. BOX 730

City HONEOYE State NY Zip Code 14471

FEC ID number of contributing federal political committee. **C** C00213611

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
135725.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2012

**Transaction ID : C4633598**

Amount of Each Receipt this Period  
3900.00

Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Dieudonne Mardigras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1024 Washington St  
 City State Zip Code  
 Baldwin NY 11510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 76.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : C4630932**  
 Amount of Each Receipt this Period  
 38.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**B. Dieudonne Mardigras**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1024 Washington St  
 City State Zip Code  
 Baldwin NY 11510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 76.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2012  
**Transaction ID : C4630933**  
 Amount of Each Receipt this Period  
 38.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**C. WILLIAM MCCLEARY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3247 BRONSON HILL RD  
 City State Zip Code  
 LIVONIA NY 14487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2012  
**Transaction ID : C4630883**  
 Amount of Each Receipt this Period  
 50.00  
**[MEMO ITEM]**  
 \* Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. Francis McGarry**

Mailing Address 95 Cardinal Avenue

City Albany State NY Zip Code 12209

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **47.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : C4630934**

Amount of Each Receipt this Period  
**47.50**

**[MEMO ITEM]**  
 \* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**B. THOMAS Mckay**

Mailing Address 114 Harrington Rd

City SYRACUSE State NY Zip Code 13224-1817

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

Name of Employer SYRACUSE UNIVERSITY Occupation UNIVERSITY PROFESSOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2012**

**Transaction ID : C4630885**

Amount of Each Receipt this Period  
**60.00**

**[MEMO ITEM]**  
 \* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**C. Tom Mowdy**

Mailing Address 140 Hollywood Dr

City Oakdale State NY Zip Code 11769-2434

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : C4630935**

Amount of Each Receipt this Period  
**95.00**

**[MEMO ITEM]**  
 \* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. RAYMOND J NEWLAND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 575 S 15TH ST

City LINDENHURST	State NY	Zip Code 11757
---------------------	-------------	-------------------

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

Name of Employer LOCAL 138	Occupation CONSTRUCTION
-------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

**Transaction ID : C4630886**

Amount of Each Receipt this Period  

50.00
-------

**[MEMO ITEM]**  
\* Dollars for Democrats

**B. RAYMOND J NEWLAND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 575 S 15TH ST

City LINDENHURST	State NY	Zip Code 11757
---------------------	-------------	-------------------

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

Name of Employer LOCAL 138	Occupation CONSTRUCTION
-------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2012

**Transaction ID : C4630887**

Amount of Each Receipt this Period  

50.00
-------

**[MEMO ITEM]**  
\* Dollars for Democrats

**C. RAYMOND J NEWLAND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 575 S 15TH ST

City LINDENHURST	State NY	Zip Code 11757
---------------------	-------------	-------------------

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

Name of Employer LOCAL 138	Occupation CONSTRUCTION
-------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2012

**Transaction ID : C4630888**

Amount of Each Receipt this Period  

50.00
-------

**[MEMO ITEM]**  
\* Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. Carlos Palacio**

Mailing Address 163 Kentucky Xing

City Rochester State NY Zip Code 14612

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

Name of Employer Unity Health System Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
112.00

Date of Receipt  
11 / 19 / 2012

Transaction ID : **C4630889**

Amount of Each Receipt this Period  
112.00

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**B. Susan Parfrey**

Mailing Address 17103 bagley Ave

City Flushing State NY Zip Code 11358

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

Name of Employer Retired Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  
11 / 19 / 2012

Transaction ID : **C4630891**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**C. VITA Pellettieri**

Mailing Address 300 E 51st St Apt 14f

City NEW YORK State NY Zip Code 10022-7815

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.50

Date of Receipt  
10 / 11 / 2012

Transaction ID : **C4630936**

Amount of Each Receipt this Period  
237.50

**[MEMO ITEM]**  
\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Herbert D Rosenbaum**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 Lenox Rd Apt B-5  
 City Rockville Centre State NY Zip Code 11570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 95.00

Date of Receipt 10 / 16 / 2012  
**Transaction ID : C4630937**  
 Amount of Each Receipt this Period 95.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**B. T. J. Samuel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8629 127th St  
 City Richmond Hill State NY Zip Code 11418-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 299.25

Date of Receipt 10 / 10 / 2012  
**Transaction ID : C4630938**  
 Amount of Each Receipt this Period 19.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

**C. T. J. Samuel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8629 127th St  
 City Richmond Hill State NY Zip Code 11418-2630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 299.25

Date of Receipt 10 / 11 / 2012  
**Transaction ID : C4630939**  
 Amount of Each Receipt this Period 19.00  
**[MEMO ITEM]**  
 \* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. T. J. Samuel**  
Full Name (Last, First, Middle Initial)

Mailing Address 8629 127th St

City Richmond Hill State NY Zip Code 11418-2630

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2012

**Transaction ID : C4630940**

Amount of Each Receipt this Period  
 28.50

**[MEMO ITEM]**  
 \* NY Party Victory Fund

**B. Abdur Sikder**  
Full Name (Last, First, Middle Initial)

Mailing Address 10312 110th St

City South Richmond Hill State NY Zip Code 11419

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : C4630941**

Amount of Each Receipt this Period  
 95.00

**[MEMO ITEM]**  
 \* NY Party Victory Fund

**C. FAYE A Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 2340 Barcelona Rd

City NIKSAYUNA State NY Zip Code 12309-5305

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

Name of Employer NYS LEGISLATIVE BILL DRAFTING COMMISS Occupation DIRECTOR OF DOCUMENT CONTROL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2012

**Transaction ID : C4630895**

Amount of Each Receipt this Period  
 25.00

**[MEMO ITEM]**  
 \* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)  
**A. FAYE A Smith**

Mailing Address 2340 Barcelona Rd

City State Zip Code  
NIKSAYUNA NY 12309-5305

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

Name of Employer Occupation  
NYS LEGISLATIVE BILL DRAFTING COMMISS DIRECTOR OF DOCUMENT CONTROL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **50.00**

Date of Receipt  
**12 / 31 / 2012**

**Transaction ID : C4630896**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
\* Dollars for Democrats

Full Name (Last, First, Middle Initial)  
**B. Arthur Soybel**

Mailing Address 36 W 44th St Ste 610

City State Zip Code  
New York NY 10036-8105

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

Name of Employer Occupation  
Self Employed Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **190.00**

Date of Receipt  
**10 / 09 / 2012**

**Transaction ID : C4630942**

Amount of Each Receipt this Period  
**190.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)  
**C. Jonathan Terry**

Mailing Address 97 Bev Cir

City State Zip Code  
Brockport NY 14420-1236

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

Name of Employer Occupation  
New York University Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  
**11 / 14 / 2012**

**Transaction ID : C4630943**

Amount of Each Receipt this Period  
**475.00**

**[MEMO ITEM]**  
\* NY Party Victory Fund

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

**A. Nicasio Urbaez**  
Full Name (Last, First, Middle Initial)  
Mailing Address 52 56 W 111th St Apt 1E  
City New York State NY Zip Code 10026  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 190.00

Date of Receipt 10 / 16 / 2012  
**Transaction ID : C4630944**  
Amount of Each Receipt this Period 190.00  
**[MEMO ITEM]**  
\* NY Party Victory Fund

**B. Elaine Walsh**  
Full Name (Last, First, Middle Initial)  
Mailing Address 225 E 79th St Apt 13B  
City New York State NY Zip Code 10075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Hunter College Occupation Professor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt 12 / 31 / 2012  
**Transaction ID : C4630897**  
Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
\* Dollars for Democrats

**C. Marie-Helen H. Weill**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50 E 79th St, Apt 20-A  
City New York State NY Zip Code 10075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Met Occupation Lecture  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 237.50

Date of Receipt 10 / 16 / 2012  
**Transaction ID : C4630945**  
Amount of Each Receipt this Period 237.50  
**[MEMO ITEM]**  
\* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 110
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial) <b>A. William Weisner</b>		Date of Receipt 10 / 23 / 2012 <b>Transaction ID : C4630946</b>
Mailing Address 74 Spencer Dr		Amount of Each Receipt this Period 237.50
City New Rochelle	State NY	Zip Code 10801
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer Tarter Kinsky and Dr	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

Full Name (Last, First, Middle Initial) <b>B. James D Wells Sr.</b>		Date of Receipt 10 / 11 / 2012 <b>Transaction ID : C4630947</b>
Mailing Address 1345 5th Ave Apt 4C		Amount of Each Receipt this Period 114.00
City New York	State NY	Zip Code 10029
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 114.00	

Full Name (Last, First, Middle Initial) <b>C. Zef Zadrma</b>		Date of Receipt 10 / 30 / 2012 <b>Transaction ID : C4630948</b>
Mailing Address 52 New Place Apt 1		Amount of Each Receipt this Period 95.00
City Yonkers	State NY	Zip Code 10704
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 95.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	45312.22

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. 2300 WRR, LLC**

Mailing Address 2300 W. Ridge Rd

City Rochester State NY Zip Code 14626

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354901

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. 2300 WRR, LLC**

Mailing Address 2300 W. Ridge Rd

City Rochester State NY Zip Code 14626

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 20 / 2012

Transaction ID : D354915

Amount of Each Disbursement this Period

342.49

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2012

Transaction ID : D350567

Amount of Each Disbursement this Period

3.95

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

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

846.44

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 09 / 2012

**Transaction ID : D350568**

Amount of Each Disbursement this Period

41.49

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2012

**Transaction ID : D350561**

Amount of Each Disbursement this Period

9.88

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 16 / 2012

**Transaction ID : D351332**

Amount of Each Disbursement this Period

29.63

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

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

81.00

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Aetna**

Mailing Address P.O. Box 7247-0233

City Philadelphia State PA Zip Code 19170-0233

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2012

**Transaction ID : D354848**

Amount of Each Disbursement this Period

336.20

Full Name (Last, First, Middle Initial)

**B. American Express Establishment Services**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2012

**Transaction ID : D354840**

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. Bennett & Associates**

Mailing Address 1461 First Avenue Suite # 205

City New York State NY Zip Code 10075

Purpose of Disbursement  
NYDLC Fundraising Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

**Transaction ID : D354920**

Amount of Each Disbursement this Period

3000.00

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

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

3344.15

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Brookhaven Town Democratic Committee**

Mailing Address P.O. Box 561,  
46 Route 25A

City East Setauket State NY Zip Code 11733

Purpose of Disbursement  
Office Rent, Phone & Utilities

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 27 / 2012

Transaction ID : D354299

Amount of Each Disbursement this Period

11170.49

Full Name (Last, First, Middle Initial)

**B. Cablevision**

Mailing Address PO Box 9256

City Chelsea State MA Zip Code 02150-9256

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 27 / 2012

Transaction ID : D354312

Amount of Each Disbursement this Period

49.90

Full Name (Last, First, Middle Initial)

**C. Chris Costello**

Mailing Address 4265 State Route 21

City Canandaigua State NY Zip Code 14424

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 12 / 2012

Transaction ID : D354904

Amount of Each Disbursement this Period

295.92

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

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

11516.31

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine LLC**

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 28 / 2012

**Transaction ID : D350562**

Amount of Each Disbursement this Period

2.10

Full Name (Last, First, Middle Initial)

**B. Democracy Engine LLC**

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 03 / 2012

**Transaction ID : D350569**

Amount of Each Disbursement this Period

1.20

Full Name (Last, First, Middle Initial)

**C. Democracy Engine LLC**

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 17 / 2012

**Transaction ID : D351331**

Amount of Each Disbursement this Period

2.10

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

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

5.40

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Deployment Related Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 21 / 2012

**Transaction ID : D356646**

Amount of Each Disbursement this Period

29972.22

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
On-Line Voter File Access

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2012

**Transaction ID : D354929**

Amount of Each Disbursement this Period

3220.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
On-Line Voter File Access

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2012

**Transaction ID : D354930**

Amount of Each Disbursement this Period

3220.00

\* In-Kind Received

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

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

36412.22

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Mailing Address P.O. Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

**Transaction ID : D354898**

Amount of Each Disbursement this Period

55.09

Full Name (Last, First, Middle Initial)

**B. FedEx**

Mailing Address P.O. Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354394**

Amount of Each Disbursement this Period

42.68

Full Name (Last, First, Middle Initial)

**C. FedEx**

Mailing Address P.O. Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354397**

Amount of Each Disbursement this Period

75.77

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

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

173.54

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Mailing Address P.O. Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

Transaction ID : D354399

Amount of Each Disbursement this Period

67.26

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAN MAFFEI**

Mailing Address PO BOX 230

City SYRACUSE State NY Zip Code 13201

Purpose of Disbursement  
Office Rent

Candidate Name

**DANIEL BENJAMIN MR. MAFFEI**

Office Sought:  House  Senate  President  
State: NY District: 24

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354899

Amount of Each Disbursement this Period

1237.31

Full Name (Last, First, Middle Initial)

**C. Frank Hoare**

Mailing Address 195 Hoags Corner Rd

City Nassau State NY Zip Code 12123

Purpose of Disbursement  
Election Protection Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354900

Amount of Each Disbursement this Period

2805.00

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

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

4109.57

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Lauren Murphy**

Mailing Address 839 Livingston Avenue

City Syracuse State NY Zip Code 13210

Purpose of Disbursement  
Photography Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

**Transaction ID : D354905**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Network Transportation and Charter, Inc.**

Mailing Address 2647 Gateway Road  
Suite 105-455

City Carlsbad State CA Zip Code 92009

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2012

**Transaction ID : D354839**

Amount of Each Disbursement this Period

11040.00

Full Name (Last, First, Middle Initial)

**C. Onondaga County Democratic Committee**

Mailing Address 615 W Genesee St

City Syracuse State NY Zip Code 13204

Purpose of Disbursement  
Election Night Room Rental, A/V & Refreshments

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

**Transaction ID : D354906**

Amount of Each Disbursement this Period

1000.00

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

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

12140.00

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2012

**Transaction ID : D354869**

Amount of Each Disbursement this Period

547.78

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2012

**Transaction ID : D354870**

Amount of Each Disbursement this Period

878.77

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2012

**Transaction ID : D354871**

Amount of Each Disbursement this Period

535.12

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

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

1961.67

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

Transaction ID : D354872

Amount of Each Disbursement this Period

96.45

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

Transaction ID : D354873

Amount of Each Disbursement this Period

82.63

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

Transaction ID : D354874

Amount of Each Disbursement this Period

99.95

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

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

279.03

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

**Transaction ID : D354875**

Amount of Each Disbursement this Period

945.69

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

**Transaction ID : D354876**

Amount of Each Disbursement this Period

79.50

Full Name (Last, First, Middle Initial)

**C. Signature Bank**

Mailing Address 71 Broadway

City New York State NY Zip Code 10006

Purpose of Disbursement  
Bank Charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2012

**Transaction ID : D354928**

Amount of Each Disbursement this Period

25.00

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

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

1050.19

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address P.O. Box 70872

City Charlotte State NC Zip Code 28272-0872

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354390**

Amount of Each Disbursement this Period

93.95

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address P.O. Box 70872

City Charlotte State NC Zip Code 28272-0872

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354392**

Amount of Each Disbursement this Period

103.90

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address PO Box 11820

City Newark State NJ Zip Code 07101-8120

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354375**

Amount of Each Disbursement this Period

94.56

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

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

292.41

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Tonic Design House**

Mailing Address 8 Charles Court

City East Patchogue State NY Zip Code 11772

Purpose of Disbursement  
NYDLC Design & Invite

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354919

Amount of Each Disbursement this Period

217.25

Full Name (Last, First, Middle Initial)

**B. University Business Center LLC**

Mailing Address 259 Alexander St

City Rochester State NY Zip Code 14607

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354902

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

Transaction ID : D354380

Amount of Each Disbursement this Period

848.47

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

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

1565.72

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354382**

Amount of Each Disbursement this Period

189.61

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354383**

Amount of Each Disbursement this Period

399.55

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354385**

Amount of Each Disbursement this Period

990.97

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

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

1580.13

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354387**

Amount of Each Disbursement this Period

28.27
-------

Full Name (Last, First, Middle Initial)

**B. Westelcom Network Inc**

Mailing Address PO Box 249,  
2 Champlain Avenue

City Westport State NY Zip Code 12993

Purpose of Disbursement Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2012			

**Transaction ID : D354916**

Amount of Each Disbursement this Period

200.30
--------

Full Name (Last, First, Middle Initial)

**C. Wilber & Clark Enterprises**

Mailing Address P.O. Box 846

City Oneonta State NY Zip Code 13820

Purpose of Disbursement Office Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354313**

Amount of Each Disbursement this Period

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

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

303.57
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Samuel May**

Mailing Address 24 Avolet Court

City State Zip Code  
Mount Sinai NY 11766

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2012

**Transaction ID : D354310**

Amount of Each Disbursement this Period

498.95
--------

Full Name (Last, First, Middle Initial)

**B. Samuel May**

Mailing Address 24 Avolet Court

City State Zip Code  
Mount Sinai NY 11766

Purpose of Disbursement  
Mileage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2012

**Transaction ID : D354311**

Amount of Each Disbursement this Period

498.95
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. David Ebner**

Mailing Address 228 Stolp Ave

City State Zip Code  
Syracuse NY 13207

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2012

**Transaction ID : D354314**

Amount of Each Disbursement this Period

1998.68
---------

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

2497.63
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Cricket Wireless**

Mailing Address 4141 S Salina St

City Syracuse State NY Zip Code 13205

Purpose of Disbursement  
Cellphone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354318**

Amount of Each Disbursement this Period

248.37
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Cricket**

Mailing Address 11950 SW Garden Pl

City Portland State OR Zip Code 97223-8248

Purpose of Disbursement  
Cell Phone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354316**

Amount of Each Disbursement this Period

1201.64
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Mr Cellphone Man Inc**

Mailing Address 339 S Salina St

City Syracuse State NY Zip Code 13202

Purpose of Disbursement  
Cellphone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354317**

Amount of Each Disbursement this Period

291.99
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[MEMO ITEM]

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

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

0.00
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 408

City Newark State NJ Zip Code 07101-0408

Purpose of Disbursement  
Cellphone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354315**

Amount of Each Disbursement this Period

256.68
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Daniel Dobkowski**

Mailing Address 3632 Redhead Terrace

City Liverpool State NY Zip Code 13090

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354319**

Amount of Each Disbursement this Period

519.86
--------

Full Name (Last, First, Middle Initial)

**C. Hess Corporation**

Mailing Address One Hess Plaza

City Woodbridge State NJ Zip Code 07095

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354321**

Amount of Each Disbursement this Period

149.97
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[MEMO ITEM]

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

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

519.86
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Sunoco**

Mailing Address 1735 Market Street, Ste LL

City State Zip Code  
Mid City West PA 19103-3758

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354320**

Amount of Each Disbursement this Period

369.89
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Ian Phillips**

Mailing Address 34 Lake Avenue

City State Zip Code  
Auburn NY 13021

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354322**

Amount of Each Disbursement this Period

1205.49
---------

Full Name (Last, First, Middle Initial)

**C. Fastrac Markets**

Mailing Address 1 North Park Street

City State Zip Code  
Clyde NY 14433

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354327**

Amount of Each Disbursement this Period

304.77
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**[MEMO ITEM]**

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

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

1205.49
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Kwik Fill**

Mailing Address 334 Grant Avenue Rd

City Auburn State NY Zip Code 13021

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354328**

Amount of Each Disbursement this Period

58.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Mobil**

Mailing Address 5959 Las Colinas Blvd.

City Irving State TX Zip Code 75039-2298

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354326**

Amount of Each Disbursement this Period

62.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Nice N Easy**

Mailing Address 41 Clark Street Rd

City Montezuma State NY Zip Code 13117

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354324**

Amount of Each Disbursement this Period

62.12

[MEMO ITEM]

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

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

0.00

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 950 Hard Road

City State Zip Code  
Webster NY 14580

Purpose of Disbursement  
Printer Ink & Photocopies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354323**

Amount of Each Disbursement this Period

232.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Sunoco**

Mailing Address 1735 Market Street, Ste LL

City State Zip Code  
Mid City West PA 19103-3758

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354325**

Amount of Each Disbursement this Period

485.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Alex Voetsch**

Mailing Address 449 West 48th St., #5E

City State Zip Code  
New York NY 10019

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354415**

Amount of Each Disbursement this Period

2313.86

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

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

2313.86

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Courier Car Rental Inc**

Mailing Address 1241 State Route 23 Ste 1

City State Zip Code  
Wayne NJ 07470-5828

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

Transaction ID : D354425

Amount of Each Disbursement this Period

1072.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FedEx Office**

Mailing Address 600 3rd Ave

City State Zip Code  
New York NY 10016

Purpose of Disbursement  
NYDLC Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

Transaction ID : D354422

Amount of Each Disbursement this Period

153.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Harrison Pizza & Pasta**

Mailing Address 248 Halstead Avenue

City State Zip Code  
Harrison NY 10528

Purpose of Disbursement  
NYDLC Food

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

Transaction ID : D354417

Amount of Each Disbursement this Period

80.48

[MEMO ITEM]

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

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

0.00

**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)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Lightning Copy & Printing**

Mailing Address 60 East 42nd Street

City New York State NY Zip Code 10165

Purpose of Disbursement  
NYDLC Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354424

Amount of Each Disbursement this Period

293.96
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Long Island Railroad**

Mailing Address Great Neck Pass Station

City Great Neck State NY Zip Code 11021

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354421

Amount of Each Disbursement this Period

40.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Metro-North Railroad**

Mailing Address 347 Madison Avenue

City New York State NY Zip Code 10017

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354420

Amount of Each Disbursement this Period

31.00
-------

[MEMO ITEM]

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

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

0.00
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. NYC Department of Finance**

Mailing Address Parking Violations  
P.O. Box 3600

City New York State NY Zip Code 10008-3600

Purpose of Disbursement  
NYDLC Parking Ticket

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354423**

Amount of Each Disbursement this Period

125.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. NYC Taxi & Limousine Commission**

Mailing Address 40 Rector Street

City New York State NY Zip Code 10006

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354419**

Amount of Each Disbursement this Period

71.20
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Eighth Avenue

City New York State NY Zip Code 10018

Purpose of Disbursement  
NYDLC Software & Photocopies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354418**

Amount of Each Disbursement this Period

142.61
--------

[MEMO ITEM]

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

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

0.00
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 408

City Newark State NJ Zip Code 07101-0408

Purpose of Disbursement  
NYDLC Cellphone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354416

Amount of Each Disbursement this Period

304.47
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Jaya Kasibhatla**

Mailing Address 4313 41st Street, Apt B1

City Sunnyside State NY Zip Code 11104

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354426

Amount of Each Disbursement this Period

127.63
--------

Full Name (Last, First, Middle Initial)

**C. Gulf Oil L.P.**

Mailing Address 100 Crossing Blvd.

City Framingham State MA Zip Code 01702-5401

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354427

Amount of Each Disbursement this Period

32.86
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[MEMO ITEM]

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

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

127.63
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mobil**

Mailing Address 5959 Las Colinas Blvd.

City Irving State TX Zip Code 75039-2298

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354428**

Amount of Each Disbursement this Period

94.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Eric Katz**

Mailing Address 24 Brookfield Pl.

City Pleasantville State NY Zip Code 10570

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354429**

Amount of Each Disbursement this Period

254.08

Full Name (Last, First, Middle Initial)

**C. A&P**

Mailing Address 355 Halstead Ave

City Harrison State NY Zip Code 10528

Purpose of Disbursement  
NYDLC Telephone

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2012

**Transaction ID : D354430**

Amount of Each Disbursement this Period

53.67

[MEMO ITEM]

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

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

254.08

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Target**

Mailing Address 9 City Place

City State Zip Code  
White Plains NY 10601

Purpose of Disbursement  
NYDLC Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354431**

Amount of Each Disbursement this Period

200.41

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. David Kogelman**

Mailing Address 160 West 97th Street, Apt. 13G

City State Zip Code  
New York NY 10025

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354432**

Amount of Each Disbursement this Period

565.33

Full Name (Last, First, Middle Initial)

**C. Hertz Rent A Car**

Mailing Address 214 W 95th St

City State Zip Code  
New York NY 10025

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354433**

Amount of Each Disbursement this Period

565.33

[MEMO ITEM]

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

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

565.33

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Danielle Levine**

Mailing Address 15 Columbia Place Apt 4

City State Zip Code  
Brooklyn NY 11201

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354434**

Amount of Each Disbursement this Period

48.57
-------

Full Name (Last, First, Middle Initial)

**B. Sunoco**

Mailing Address 1735 Market Street, Ste LL

City State Zip Code  
Mid City West PA 19103-3758

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354435**

Amount of Each Disbursement this Period

48.57
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Abel McDonnell**

Mailing Address 967 Bergen St, Apt. 1C

City State Zip Code  
Brooklyn NY 11216

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

**Transaction ID : D354436**

Amount of Each Disbursement this Period

70.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

118.57
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Sunoco**

Mailing Address 1735 Market Street, Ste LL

City State Zip Code  
Mid City West PA 19103-3758

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354437**

Amount of Each Disbursement this Period

70.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Etan Newman**

Mailing Address 639 Sterling Pl. #3L

City State Zip Code  
Brooklyn NY 11238

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354438**

Amount of Each Disbursement this Period

12.55

Full Name (Last, First, Middle Initial)

**C. New Jersey Turnpike Authority**

Mailing Address P.O. Box 5042

City State Zip Code  
Woodbridge NJ 07095-5042

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354439**

Amount of Each Disbursement this Period

12.55

[MEMO ITEM]

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

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

12.55

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Alejandro Ortega**

Mailing Address 540 W 122nd St, #22

City State Zip Code  
New York NY 10027

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	7			2	0	1	2		

**Transaction ID : D354440**

Amount of Each Disbursement this Period

5	2	.	1	5
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Full Name (Last, First, Middle Initial)

**B. New Jersey Turnpike Authority**

Mailing Address P.O. Box 5042

City State Zip Code  
Woodbridge NJ 07095-5042

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	7			2	0	1	2		

**Transaction ID : D354443**

Amount of Each Disbursement this Period

2	0	.	0	0
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Sunoco**

Mailing Address 1735 Market Street, Ste LL

City State Zip Code  
Mid City West PA 19103-3758

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	7			2	0	1	2		

**Transaction ID : D354442**

Amount of Each Disbursement this Period

3	0	.	0	0
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**[MEMO ITEM]**

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

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

5	2	.	1	5
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5	2	.	1	5
---	---	---	---	---

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. The Port Authority of NY & NJ**

Mailing Address 2 Montgomery Street, 4th Floor

City Jersey City State NJ Zip Code 07302

Purpose of Disbursement  
NYDLC Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354445

Amount of Each Disbursement this Period

2	.	1	5
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Barbara Sullivan-Parry**

Mailing Address 190 Ivy Street

City Oyster Bay State NY Zip Code 11771

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354446

Amount of Each Disbursement this Period

4	5	0	.	5	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 90 Jericho Turnpike

City Jericho State NY Zip Code 11753

Purpose of Disbursement  
NYDLC Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2012			

Transaction ID : D354447

Amount of Each Disbursement this Period

4	5	0	.	5	8
---	---	---	---	---	---

[MEMO ITEM]

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

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

4	5	0	.	5	8
---	---	---	---	---	---

4	5	0	.	5	8
---	---	---	---	---	---

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Pam Bennett**

Mailing Address 1461 First Avenue, #205

City New York State NY Zip Code 10075

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2012			

**Transaction ID : D354921**

Amount of Each Disbursement this Period

493.94
--------

Full Name (Last, First, Middle Initial)

**B. Agata & Valentina**

Mailing Address 1505 First Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement  
NYDLC Food

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2012			

**Transaction ID : D354922**

Amount of Each Disbursement this Period

364.73
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Yorkshire Wines & Spirits**

Mailing Address 1646 1st Avenue

City New York State NY Zip Code 10028

Purpose of Disbursement  
NYDLC Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			12			2012			

**Transaction ID : D354923**

Amount of Each Disbursement this Period

129.21
--------

**[MEMO ITEM]**

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

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

493.94
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Douglas Dunham**

Mailing Address Skadden Arps  
4 Times Square

City New York State NY Zip Code 10036

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354924

Amount of Each Disbursement this Period

1288.43

Full Name (Last, First, Middle Initial)

**B. Skadden Arps**

Mailing Address 4 Times Square

City New York State NY Zip Code 10036

Purpose of Disbursement  
NYDLC Food & Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 12 / 2012

Transaction ID : D354925

Amount of Each Disbursement this Period

1288.43

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment-see below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2012

Transaction ID : D354950

Amount of Each Disbursement this Period

4303.90

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

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

5592.33

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Cricket**

Mailing Address 11950 SW Garden Pl

City Portland State OR Zip Code 97223-8248

Purpose of Disbursement  
Cell Phone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

Transaction ID : D355345

Amount of Each Disbursement this Period

588.11
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. giftcardmall.com**

Mailing Address 6220 Stoneridge Mall Rd

City Pleasanton State CA Zip Code 94588-3260

Purpose of Disbursement  
Gas Cards

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

Transaction ID : D355347

Amount of Each Disbursement this Period

946.14
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Drive

City Framingham State MA Zip Code 01702

Purpose of Disbursement  
Office Expense

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

Transaction ID : D355348

Amount of Each Disbursement this Period

713.93
--------

[MEMO ITEM]

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

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

0.00
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. SVM, LP**

Mailing Address 200 E. Howard Avenue, Suite 220

City Des Plaines State IL Zip Code 60018

Purpose of Disbursement  
Gas Cards

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

**Transaction ID : D354952**

Amount of Each Disbursement this Period

1044.45
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

**Transaction ID : D354951**

Amount of Each Disbursement this Period

396.20
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. US Postal Store**

Mailing Address 475 L'Enfant Plz SW

City Washington State DC Zip Code 20260

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2012			

**Transaction ID : D354953**

Amount of Each Disbursement this Period

451.75
--------

[MEMO ITEM]

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

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

0.00
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**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Vesta Cingular**

Mailing Address 11950 SW Garden Pl

City Portland State OR Zip Code 97223

Purpose of Disbursement  
Cellphone Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 28 / 2012

**Transaction ID : D355346**

Amount of Each Disbursement this Period

163.32

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

0.00

89865.35

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Party Transfer

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : D354897**

Amount of Each Disbursement this Period

93073.44

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

93073.44

93073.44

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Lawrence Balter**

Mailing Address 92 E Main St Apt 1

City Beacon State NY Zip Code 12508

Purpose of Disbursement  
Wages-Voided

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2012

**Transaction ID : D354907**

Amount of Each Disbursement this Period

-420.96

Full Name (Last, First, Middle Initial)

**B. Lawrence Balter**

Mailing Address 92 E Main St Apt 1

City Beacon State NY Zip Code 12508

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2012

**Transaction ID : D354908**

Amount of Each Disbursement this Period

420.96

Full Name (Last, First, Middle Initial)

**C. Claire Cusella**

Mailing Address 71 Reynolds Road

City West Seneca State NY Zip Code 14224

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 19 / 2012

**Transaction ID : D354909**

Amount of Each Disbursement this Period

1199.74

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

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

1199.74

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. EM Strategies LLC**

Mailing Address 248 Barnswallow Ct

City State Zip Code  
Manorville NY 11949

Purpose of Disbursement  
Field and Canvass Campaign Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 27 / 2012

**Transaction ID : D354300**

Amount of Each Disbursement this Period

3250.00

Full Name (Last, First, Middle Initial)

**B. David Heller**

Mailing Address 4 Berkshore St. Up

City State Zip Code  
Rochester NY 14607

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2012

**Transaction ID : D354910**

Amount of Each Disbursement this Period

1199.74

Full Name (Last, First, Middle Initial)

**C. Richard J. Horner Jr.**

Mailing Address 767 Mineral Springs Rd.

City State Zip Code  
West Seneca NY 14224

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : D354854**

Amount of Each Disbursement this Period

2233.65

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

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

6683.39

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Noam Kurland**

Mailing Address 113 Tennyson Dr

City Nanuet State NY Zip Code 10954

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : D354896**

Amount of Each Disbursement this Period

168.93

Full Name (Last, First, Middle Initial)

**B. Cassandra Lange**

Mailing Address 175 Riverdale Drive

City Grand Island State NY Zip Code 14072

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2012

**Transaction ID : D354911**

Amount of Each Disbursement this Period

1175.34

Full Name (Last, First, Middle Initial)

**C. Kyle W. Madden**

Mailing Address 416 Countess Drive

City West Henrietta State NY Zip Code 14586

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2012

**Transaction ID : D354912**

Amount of Each Disbursement this Period

3030.71

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

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

4374.98

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City Mansfield Center State CT Zip Code 06250

Purpose of Disbursement  
Exempt Mail-Maloney

Candidate Name  
**SEAN PATRICK MALONEY**

Office Sought:  House  
 Senate  
 President  
State: NY District: 18

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2012

**Transaction ID : D354917**

Amount of Each Disbursement this Period

45481.01

Full Name (Last, First, Middle Initial)

**B. Abram Morgan**

Mailing Address 3304 Sandy Beach Rd.

City Grand Island State NY Zip Code 14072

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2012

**Transaction ID : D354913**

Amount of Each Disbursement this Period

1175.34

Full Name (Last, First, Middle Initial)

**C. Oxford Health Plans**

Mailing Address P.O. Box 1697

City Newark State NJ Zip Code 07101-1697

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2012

**Transaction ID : D354867**

Amount of Each Disbursement this Period

1506.98

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

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

48163.33

**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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : D354864

Amount of Each Disbursement this Period

1243.08
---------

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : D354865

Amount of Each Disbursement this Period

36.19
-------

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2012

Transaction ID : D354887

Amount of Each Disbursement this Period

4204.76
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5484.03
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**TOTAL** This Period (last page this line number only)..... ▶

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# 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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffrey L Worcester II**

Mailing Address 48 Fallingwood Terrace

City Rochester State NY Zip Code 14612

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2012

Transaction ID : D354914

Amount of Each Disbursement this Period

2103.05
---------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

2103.05
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68008.52
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 87 OF 110
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**New York State Democratic Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Zale Koff Graphics, Inc.</b>	Nature of Debt (Purpose): Printing
Mailing Address 225 Varick Street, 4th Floor	
City State Zip Code New York NY 10014	

Outstanding Balance Beginning This Period <input type="text" value="24613.55"/>	<b>Transaction ID : D1365</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24613.55"/>

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

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="24613.55"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="24613.55"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="24613.55"/>

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	MM / DD / YYYY 11 / 30 / 2012	17285.78

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	17285.78
<b>Transaction ID : T1376</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	MM / DD / YYYY 12 / 10 / 2012	12451.25

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	12451.25
<b>Transaction ID : T1377</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	MM / DD / YYYY 12 / 14 / 2012	23580.24

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	23580.24
<b>Transaction ID : T1378</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	MM / DD / YYYY 12 / 27 / 2012	14531.62

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	14531.62
<b>Transaction ID : T1379</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	67848.89
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	67848.89

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D354847
Aetna
Mailing Address P.O. Box 7247-0233
City Philadelphia State PA Zip Code 19170-0233
Purpose of Disbursement: Health Insurance
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 876310.93
Date: 12/04/2012
FEDERAL SHARE: 176.76 NONFEDERAL SHARE: 314.24 TOTAL AMOUNT: 491.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D354918
Alex Voetsch
Mailing Address 315 West 54th Street, Apt. 8
City New York State NY Zip Code 10019
Purpose of Disbursement: Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 876310.93
Date: 12/05/2012
FEDERAL SHARE: 3242.51 NONFEDERAL SHARE: 5764.46 TOTAL AMOUNT: 9006.97

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D354926
Alex Voetsch
Mailing Address 315 West 54th Street, Apt. 8
City New York State NY Zip Code 10019
Purpose of Disbursement: Wages
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 876310.93
Date: 12/19/2012
FEDERAL SHARE: 446.22 NONFEDERAL SHARE: 793.28 TOTAL AMOUNT: 1239.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3865.49, 6871.98, 10737.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) <b>Alex Voetsch</b>		Transaction ID : <b>D354927</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 315 West 54th Street, Apt. 8			Allocated Activity or Event Year-To-Date 876310.93		
City New York	State NY	Zip Code 10019	Date 12 / 31 / 2012		
Purpose of Disbursement: Wages		Category/ Type	Date		
Activity or Event Identifier: Administrative			12 / 31 / 2012		
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
434.03			771.61		1205.64

B. Full Name (Last, First, Middle Initial) <b>BankDirect Capital Finance</b>		Transaction ID : <b>D354879</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 660448			Allocated Activity or Event Year-To-Date 876310.93		
City Dallas	State TX	Zip Code 75266-0448	Date 12 / 17 / 2012		
Purpose of Disbursement: Insurance		Category/ Type	Date		
Activity or Event Identifier: Administrative			12 / 17 / 2012		
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.07			305.90		477.97

C. Full Name (Last, First, Middle Initial) <b>Brooke Weinstein</b>		Transaction ID : <b>D354858</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 470 2nd Ave Apt 6B			Allocated Activity or Event Year-To-Date 876310.93		
City New York	State NY	Zip Code 10016	Date 12 / 05 / 2012		
Purpose of Disbursement: Wages		Category/ Type	Date		
Activity or Event Identifier: Administrative			12 / 05 / 2012		
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
417.48			742.20		1159.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1023.58		1819.71		2843.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Full Name (Last, First, Middle Initial) Brooke Weinstein, Transaction ID : D354885, Allocated Activity or Event: Administrative, Date: 12/19/2012, FEDERAL SHARE: 417.49, NONFEDERAL SHARE: 742.20, TOTAL AMOUNT: 1159.69

Form B: Full Name (Last, First, Middle Initial) Brooke Weinstein, Transaction ID : D354895, Allocated Activity or Event: Administrative, Date: 12/31/2012, FEDERAL SHARE: 406.80, NONFEDERAL SHARE: 723.19, TOTAL AMOUNT: 1129.99

Form C: Full Name (Last, First, Middle Initial) Capital One Bank, Transaction ID : D354889, Allocated Activity or Event: Administrative, Date: 12/21/2012, FEDERAL SHARE: 355.69, NONFEDERAL SHARE: 632.34, TOTAL AMOUNT: 988.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1179.98, 2097.73, 3277.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial) Transaction ID : D354888**  
**Connective Strategies LLC**  
Mailing Address 134-40 135 Avenue, 1st Floor

City State Zip Code  
South Ozone Park NY 11420

Purpose of Disbursement:  
Voter File Expense

Activity or Event Identifier:  
**Administrative**

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
876310.93

Date M M / D D / Y Y Y Y Y Y  
12 / 20 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00		800.00		1250.00

**B. Full Name (Last, First, Middle Initial) Transaction ID : D354878**  
**Emmet, Marvin & Martin, LLP**  
Mailing Address 120 Broadway

City State Zip Code  
New York NY 10271

Purpose of Disbursement:  
Office Rent, Copier Charges & Postage

Activity or Event Identifier:  
Administrative

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
876310.93

Date M M / D D / Y Y Y Y Y Y  
12 / 12 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
748.68		1330.99		2079.67

**C. Full Name (Last, First, Middle Initial) Transaction ID : D354857**  
**Isabelle M. Parker**  
Mailing Address 106-16 159th St.

City State Zip Code  
Jamaica NY 11433

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
876310.93

Date M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
517.99		920.88		1438.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1716.67		3051.87		4768.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) <b>Isabelle M. Parker</b>		Transaction ID : <b>D354884</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.				Allocated Activity or Event Year-To-Date 876310.93		
City Jamaica	State NY	Zip Code 11433		Date 12 / 19 / 2012		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: <b>Administrative</b>						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
517.99			920.88			1438.87

B. Full Name (Last, First, Middle Initial) <b>Isabelle M. Parker</b>		Transaction ID : <b>D354894</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.				Allocated Activity or Event Year-To-Date 876310.93		
City Jamaica	State NY	Zip Code 11433		Date 12 / 31 / 2012		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
503.87			895.76			1399.63

C. Full Name (Last, First, Middle Initial) <b>Leslie Ng</b>		Transaction ID : <b>D354855</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd				Allocated Activity or Event Year-To-Date 876310.93		
City East Brunswick	State NJ	Zip Code 08816-1103		Date 12 / 05 / 2012		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
560.31			996.12			1556.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1582.17		2812.76		4394.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Leslie Ng, Transaction ID: D354883. Allocated Activity or Event: Administrative. Date: 12/19/2012. Total Amount: 1556.43.

Form B: Leslie Ng, Transaction ID: D354893. Allocated Activity or Event: Administrative. Date: 12/31/2012. Total Amount: 1514.11.

Form C: Oxford Health Plans, Transaction ID: D354866. Allocated Activity or Event: Administrative. Date: 12/07/2012. Total Amount: 3013.96.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2190.42, 3894.08, 6084.50.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D354863
PAYCHEX
Mailing Address 1551 S. Washington Ave., P.O. Box 1180
City Piscataway State NJ Zip Code 08854
Purpose of Disbursement: Payroll Taxes/Withholdings
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/05/2012
FEDERAL SHARE 4922.37 NONFEDERAL SHARE 8750.87 TOTAL AMOUNT 13673.24

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D354868
PAYCHEX
Mailing Address 1551 S. Washington Ave., P.O. Box 1180
City Piscataway State NJ Zip Code 08854
Purpose of Disbursement: Payroll Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/07/2012
FEDERAL SHARE 64.09 NONFEDERAL SHARE 113.93 TOTAL AMOUNT 178.02

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D354886
PAYCHEX
Mailing Address 1551 S. Washington Ave., P.O. Box 1180
City Piscataway State NJ Zip Code 08854
Purpose of Disbursement: Payroll Taxes/Withholdings
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 12/19/2012
FEDERAL SHARE 2353.06 NONFEDERAL SHARE 4183.21 TOTAL AMOUNT 6536.27

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 7339.52, 13048.01, 20387.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D354882 Richard J. Horner Jr. Mailing Address 767 Mineral Springs Rd. City West Seneca State NY Zip Code 14224 Purpose of Disbursement: Wages Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 876310.93 Date 12/19/2012 FEDERAL SHARE 804.11 NONFEDERAL SHARE 1429.53 TOTAL AMOUNT 2233.64

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D354892 Richard J. Horner Jr. Mailing Address 767 Mineral Springs Rd. City West Seneca State NY Zip Code 14224 Purpose of Disbursement: Wages Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 876310.93 Date 12/31/2012 FEDERAL SHARE 781.18 NONFEDERAL SHARE 1388.77 TOTAL AMOUNT 2169.95

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D354851 Rodney Capel Mailing Address 40 W 135th Street Apt 11R City New York State NY Zip Code 10037 Purpose of Disbursement: Wages Activity or Event Identifier: Administrative Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 876310.93 Date 12/05/2012 FEDERAL SHARE 1488.29 NONFEDERAL SHARE 2645.86 TOTAL AMOUNT 4134.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3073.58, 5464.16, 8537.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D354880</b> <b>Rodney Capel</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 40 W 135th Street Apt 11R		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10037	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: <b>Administrative</b>		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
1488.29 + 2645.86 = 4134.15			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D354890</b> <b>Rodney Capel</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 40 W 135th Street Apt 11R		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10037	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
1447.55 + 2573.42 = 4020.97			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D354877</b> <b>Rose Hill Property Assoc Inc</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address c/o Murray Hill Properties 277 Park Avenue		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10172	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Office Rent		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
3237.53 + 5755.61 = 8993.14			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6173.37		10974.89		17148.26

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
6173.37	10974.89	17148.26

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D354852</b> <b>Thomas J Giordano</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 309 Columbus Ave Apt 4C		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10023	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: <b>Administrative</b>		Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
608.79 + 1082.30 = 1691.09			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D354881</b> <b>Thomas J Giordano</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 309 Columbus Ave Apt 4C		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10023	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
608.80 + 1082.31 = 1691.11			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D354891</b> <b>Thomas J Giordano</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 309 Columbus Ave Apt 4C		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10023	Category/ Type	Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative		Date <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
593.45 + 1055.03 = 1648.48			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1811.04		3219.64		5030.68

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : D354849
TriSource Solutions LLC
Mailing Address 5405 Utica Ridge Road, Suite 208
City Davenport State IA Zip Code 52807
Purpose of Disbursement: Credit Card Fee
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 876310.93
Date 12 / 04 / 2012
FEDERAL SHARE 263.21 + NONFEDERAL SHARE 467.93 = TOTAL AMOUNT 731.14

B. Full Name (Last, First, Middle Initial) Transaction ID : D354448
Tom Giordano
Mailing Address 309 Columbus Ave Apt 4C
City New York State NY Zip Code 10023
Purpose of Disbursement: Expense Reimbursements-see below
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 876310.93
Date 11 / 28 / 2012
FEDERAL SHARE 219.55 + NONFEDERAL SHARE 390.30 = TOTAL AMOUNT 609.85

C. Full Name (Last, First, Middle Initial) Transaction ID : D355360
Famous Ray's Pizza
Mailing Address 831 7th Avenue
City New York State NY Zip Code 10012
Purpose of Disbursement: Food & Beverage
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 876310.93
Date 11 / 28 / 2012
FEDERAL SHARE 32.40 + NONFEDERAL SHARE 57.60 = TOTAL AMOUNT 90.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 482.76, 858.23, 1340.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: FedEx Office. Transaction ID: D354501. Allocated Activity or Event: Administrative. Purpose of Disbursement: Election Night Printing. Activity or Event Identifier: Administrative. Date: 11/28/2012. Total Amount: 162.33.

Form B: NYC Taxi & Limousine Commission. Transaction ID: D354502. Allocated Activity or Event: Administrative. Purpose of Disbursement: Election Night Travel. Activity or Event Identifier: Administrative. Date: 11/28/2012. Total Amount: 61.42.

Form C: Staples. Transaction ID: D354500. Allocated Activity or Event: Administrative. Purpose of Disbursement: Election Night Supplies. Activity or Event Identifier: Administrative. Date: 11/28/2012. Total Amount: 296.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D354931</b> <b>American Express</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 1270		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code Newark NJ 07101-1270	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
Purpose of Disbursement: Credit Card Payment-see below	Category/Type <input type="text"/>		
Activity or Event Identifier: <b>Administrative</b>	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
2132.85 + 3791.73 = 5924.58			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D354946</b> <b>Allianz Global Assistance</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2805 N Parham Rd Ste 100		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code Richmond VA 23294-4426	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
Purpose of Disbursement: Travel Insurance	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
10.88 + 19.34 = 30.22			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D354948</b> <b>Corporate Audio Visual</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 111 N Lawn Avenue		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code Elmsford NY 10523-1904	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
Purpose of Disbursement: A/V Rental	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
701.59 + 1247.27 = 1948.86			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2132.85		3791.73		5924.58

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Delta Airlines. Transaction ID: D354945. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 503.60.

Form B: eFax.com. Transaction ID: D354938. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 101.70.

Form C: Enterprise Rent A Car. Transaction ID: D354932. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 150.53.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: FedEx Express. Transaction ID: D354943. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 59.75.

Form B: GoDaddy.com. Transaction ID: D354942. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 79.14.

Form C: Hostgator.com LLC. Transaction ID: D354936. Allocated Activity or Event: Administrative. Date: 11/28/2012. Total Amount: 149.85.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D354944</b> <b>Hyatt Regency Rochester</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 125 Main Street E		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code Rochester NY 14604	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Travel		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
39.40 + 70.04 = 109.44			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D354934</b> <b>Intermedia.net</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 150 Mathilda Place, Suite 104		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code Sunnyvale CA 94086	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Computer Server Hosting		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative [MEMO ITEM]		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
310.12 + 551.32 = 861.44			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D354940</b> <b>Manhattan Mini Storage</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 401 E 110th St		Allocated Activity or Event Year-To-Date 876310.93	
City State Zip Code New York NY 10039	Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
Purpose of Disbursement: Office Storage		Allocated Activity or Event Year-To-Date 876310.93	
Activity or Event Identifier: Administrative [MEMO ITEM]		Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
560.52 + 996.48 = 1557.00			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
0.00	0.00	0.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) <b>Mark PayPal</b>		Transaction ID : <b>D355361</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2145 Hamilton Ave			Allocated Activity or Event Year-To-Date 876310.93	
City San Jose	State CA	Zip Code 95125-5905	Date 11 / 28 / 2012	
Purpose of Disbursement: Internet		Category/ Type	Date 11 / 28 / 2012	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
21.60			38.40	60.00

B. Full Name (Last, First, Middle Initial) <b>Network Solutions</b>		Transaction ID : <b>D354947</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13861 Sunrise Valley Drive, Suite 300			Allocated Activity or Event Year-To-Date 876310.93	
City Herndon	State VA	Zip Code 20171	Date 11 / 28 / 2012	
Purpose of Disbursement: Domain Renewal Fee		Category/ Type	Date 11 / 28 / 2012	
Activity or Event Identifier: Administrative [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
27.35			48.63	75.98

C. Full Name (Last, First, Middle Initial) <b>Stones' Phones</b>		Transaction ID : <b>D354949</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 41750 Rch Las Palmas Dr			Allocated Activity or Event Year-To-Date 876310.93	
City Rancho Mirage	State CA	Zip Code 92270-5511	Date 11 / 28 / 2012	
Purpose of Disbursement: Auto Calls		Category/ Type	Date 11 / 28 / 2012	
Activity or Event Identifier: Administrative [MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
66.67			118.53	185.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Wall St Journal, Transaction ID: D354941. Includes fields for Name, Address, City/State/Zip, Purpose (Subscription), Activity Identifier (Administrative), Date (11/28/2012), and Amounts (FEDERAL SHARE: 18.67, NONFEDERAL SHARE: 33.20, TOTAL AMOUNT: 51.87).

Form B: Empty form for disbursement entry with fields for Name, Address, City/State/Zip, Purpose, Activity Identifier, Date, and Amounts.

Form C: Empty form for disbursement entry with fields for Name, Address, City/State/Zip, Purpose, Activity Identifier, Date, and Amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (0.00) + NONFEDERAL SHARE (0.00) = TOTAL AMOUNT (0.00)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE (32571.43) + NONFEDERAL SHARE (57904.79) = TOTAL AMOUNT (90476.22)

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SchedL1

NAME OF COMMITTEE (In Full) New York State Democratic Committee		
NAME OF ACCOUNT Levin account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized ..... (Use Schedule L-A)	0.00	0.00
(b) Unitemized .....	0.00	0.00
(c) Total .....	0.00	0.00
2. OTHER RECEIPTS .....	0.00	0.00
3. TOTAL RECEIPTS .....	0.00	0.00
(Add Lines 1c and 2)		
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration .....	0.00	0.00
(b) Voter ID .....	0.00	0.00
(c) GOTV .....	0.00	0.00
(d) Generic Campaign .....	0.00	0.00
(e) Total .....	0.00	0.00
5. OTHER DISBURSEMENTS .....	0.00	0.00
6. TOTAL DISBURSEMENTS .....	0.00	0.00
(Add Lines 4e and 5)		
7. BEGINNING CASH ON HAND .....	189.58	189.58
(for Column B, use cash as of January 1st)		
8. RECEIPTS .....	0.00	0.00
(from Line 3)		
9. SUBTOTAL .....	189.58	189.58
(Add Lines 7 and 8)		
10. DISBURSEMENTS .....	0.00	0.00
(From Line 6)		
11. ENDING CASH ON HAND .....	189.58	189.58
(Subtract Line 10 From Line 9)		