

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Friends of George Demos

ADDRESS (number and street)

PO BOX 378

Check if different
than previously
reported. (ACC)

Ronkonkoma

NY

11779

2. FEC IDENTIFICATION NUMBER ▼

C

C00549816

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

06

D D /

05

Y Y Y Y /

2014

through

M M /

06

D D /

30

Y Y Y Y /

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Cole

Signature of Treasurer

Robert Cole

[Electronically Filed]

Date

M M /

11

D D /

25

Y Y Y Y /

2014

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Friends of George Demos

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7280.00	300905.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7280.00	300905.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	827445.28	2737280.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	827445.28	2737280.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	63624.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2500000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of George Demos

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

6100.00

293505.00

(ii) Unitemized.....

1180.00

7400.00

(iii) TOTAL of contributions from individuals ▶

7280.00

300905.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

7280.00

300905.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

500000.00

2500000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

500000.00

2500000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

507280.00

2800905.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 46

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	827445.28	2737280.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	827445.28	2737280.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	383789.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	507280.00
25. SUBTOTAL (add Line 23 and Line 24).....	891069.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	827445.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	63624.17

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3A

Transaction ID :

In response to Item 1 on the FEC Request for Additional Information dated October 21, 2014, all General Election contributions were refunded on October 1, 2014, and will be reflected in the Year End Report

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 46

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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

NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Edward Bausman

A.

Mailing Address PO Box 2001

City

Shelter Island

State

NY

Zip Code

11964

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 15 / 2014

Transaction ID : SA11AI.5428

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Froso Beys

B.

Mailing Address 930 5th Ave.
Apt. 3A

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Corcoran Group Real Estate

Occupation

Broker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.5434

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Froso Beys

C.

Mailing Address 930 5th Ave.
Apt. 3A

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Corcoran Group Real Estate

Occupation

Broker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 20 / 2014

Transaction ID : SA11AI.5436

Amount of Each Receipt this Period

650.00

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

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

1400.00

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

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

FOR LINE NUMBER:

PAGE 7 OF 46

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

John Caracciolo

A.

Mailing Address 2 Midvale Ct.

City

East Northport

State

NY

Zip Code

11731

FEC ID number of contributing
federal political committee.

C

Name of Employer

LI News Radio

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2014

Transaction ID : SA11AI.5432

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Lazaros Kircos

B.

Mailing Address 203 Lakeland

City

Grosse Pointe

State

MI

Zip Code

48230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Bakery Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2014

Transaction ID : SA11AI.5430

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Herbert Loinig

C.

Mailing Address PO Box 1606

City

East Hampton

State

NY

Zip Code

11937

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self employed

Occupation

Inn owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2014

Transaction ID : SA11AI.5424

Amount of Each Receipt this Period

200.00

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

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

950.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 46

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Dorothy Martinos

A.

Mailing Address PO Box 5940

City

Miller Place

State

NY

Zip Code

11764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Areal Enterprises

Occupation

President

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2014

Transaction ID : SA11AI.5426

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Christopher Pappas

B.

Mailing Address 13939 Northwest Freeway
Suite 100

City

Houston

State

TX

Zip Code

77040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pappas Restaurants

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2014

Transaction ID : SA11AI.5439

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Fotios Plakogiannis

C.

Mailing Address 157-14 Crydens Lane

City

Whitestone

State

NY

Zip Code

11357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Executive

Occupation

Aequus Pharmaceuticals

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2014

Transaction ID : SA11AI.5435

Amount of Each Receipt this Period

500.00

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

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

1750.00

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

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

FOR LINE NUMBER:

PAGE 9 OF 46

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

James Regas

A.

Mailing Address 46 Baybrook Lane

City

Oakbrook

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		07		2014

Transaction ID : SA11AI.5437

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

James Regas

B.

Mailing Address 46 Baybrook Lane

City

Oakbrook

State

IL

Zip Code

60523

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.5066

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

2000.00

6100.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

George G Demos

A.

Mailing Address PO BOX 378

City

Ronkonkoma

State

NY

Zip Code

11779

FEC ID number of contributing
federal political committee.

C H0NY01137

Name of Employer
George Demos, ESQ.Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA13A.5545

Amount of Each Receipt this Period

250000.00

Full Name (Last, First, Middle Initial)

George G Demos

B.

Mailing Address PO BOX 378

City

Ronkonkoma

State

NY

Zip Code

11779

FEC ID number of contributing
federal political committee.

C H0NY01137

Name of Employer
George Demos, ESQ.Occupation
Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2014

Transaction ID : SA13A.5546

Amount of Each Receipt this Period

250000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

500000.00

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

500000.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SA13A
Transaction ID : SA13A.5545

This loan came from personal funds. Originally, the box was not checked as such. It was a clerical error.

Form/Schedule: SA13A
Transaction ID: SA13A.5546

This loan came from personal funds. Originally, the box was not checked as such. It was a clerical error.

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. AJF and Associates

Mailing Address 16 N Astor Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement
Polling

Amount of Each Disbursement this Period

57132.24

Transaction ID : SB17.5491

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. B.I. Ink, Inc.

Mailing Address 1075 Route 25A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement
Campaign tee shirts

Amount of Each Disbursement this Period

379.54

Transaction ID : SB17.5445

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. B.I. Ink, Inc.

Mailing Address 1075 Route 25A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement
Lawn signs

Amount of Each Disbursement this Period

720.00

Transaction ID : SB17.5467

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

58231.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. B.I. Ink, Inc.

Mailing Address 1075 Route 25A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement
Campaign tee shirts

Amount of Each Disbursement this Period

360.00

Transaction ID : SB17.5446

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Centereach Post Office

Mailing Address 245 Centereach Mall

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement
Stamps

Amount of Each Disbursement this Period

98.00

Transaction ID : SB17.5505

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5525

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

483.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5531

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5526

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5523

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

75.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5524

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5521

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5522

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

75.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Wire FeeCategory/
Type

Transaction ID : SB17.5528

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Wire FeeCategory/
Type

Transaction ID : SB17.5520

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement
Wire FeeCategory/
Type

Transaction ID : SB17.5527

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

75.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5519

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5529

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Chase

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement
Wire Fee

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.5530

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

75.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Chris Mottola Consulting

Mailing Address 1382 Lafayette St

City	State	Zip Code
Cape May	NJ	08204

Purpose of Disbursement
Media Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

187504.14

Transaction ID : SB17.5542

B. Chris Mottola Consulting

Mailing Address 1382 Lafayette St

City	State	Zip Code
Cape May	NJ	08204

Purpose of Disbursement
Media Production

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

Amount of Each Disbursement this Period

104617.33

Transaction ID : SB17.5541

c. Facebook

Mailing Address 770 Broadway

City	State	Zip Code
New York	NY	10003

Purpose of Disbursement
Internet Ads

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5466

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

187504.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Fusion Management Systems

Mailing Address 95 Route 17 South

City	State	Zip Code
Paramus	NJ	06752

Purpose of Disbursement
Internet Ads

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.5539

B. Andrew Gibson

Mailing Address 10 Waterside Plaza

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.5461

c. GoDaddy

Mailing Address 14455 N. Hayden Rd., Suite 226

City	State	Zip Code
Scottsdale	AZ	85260

Purpose of Disbursement
Web services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

22.16

Transaction ID : SB17.5518

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

7522.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 111 8th Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
New York	NY	10011

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Internet AdsCategory/
Type**Transaction ID : SB17.5464**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Hertz

Mailing Address 100 Arrival Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

182.36

Purpose of Disbursement
Rental carCategory/
Type**Transaction ID : SB17.5495**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Hess

Mailing Address 2825 Middle Country Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

42.31

Purpose of Disbursement
GasCategory/
Type**Transaction ID : SB17.5455**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

424.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Hess

Mailing Address 2825 Middle Country Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

136561.43

Purpose of Disbursement
GasCategory/
Type

Transaction ID : SB17.5456

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Intelligent Search Technology

Mailing Address 125 Summer St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2014

City	State	Zip Code
Boston	MA	02110

Amount of Each Disbursement this Period

108.88

Purpose of Disbursement
ResearchCategory/
Type

Transaction ID : SB17.5544

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. In The Field Consulting

Mailing Address 1520 Myron Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

City	State	Zip Code
Niskayuna	NY	12309

Amount of Each Disbursement this Period

136417.00

Purpose of Disbursement
Media BuyCategory/
Type

Transaction ID : SB17.5469

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

136561.43

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. In The Field Consulting

Mailing Address 1520 Myron Street

City	State	Zip Code
Niskayuna	NY	12309

Purpose of Disbursement
Media Buy

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

30000.00

Transaction ID : SB17.5471

B. In The Field Consulting

Mailing Address 1520 Myron Street

City	State	Zip Code
Niskayuna	NY	12309

Purpose of Disbursement
Media Buy

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

200000.00

Transaction ID : SB17.5468

c. In The Field Consulting

Mailing Address 1520 Myron Street

City	State	Zip Code
Niskayuna	NY	12309

Purpose of Disbursement
Media Buy

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

43652.15

Transaction ID : SB17.5470

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

273652.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Phil Junquera

Mailing Address 55 Egypt Close

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
E. Hampton	NY	11937

Amount of Each Disbursement this Period

2039.67

Purpose of Disbursement
Volunteer reimbursement

Candidate Name

Category/
Type**Transaction ID : SB17.5516**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Kings Park Post Office

Mailing Address 125 E. Main St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
Kings Park	NY	11754

Amount of Each Disbursement this Period

833.00

Purpose of Disbursement
Stamps

Candidate Name

Category/
Type**Transaction ID : SB17.5500**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Lake Grove Post Office

Mailing Address 1001 Hawkins Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		21		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

147.00

Purpose of Disbursement
Stamps

Candidate Name

Category/
Type**Transaction ID : SB17.5503**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

3019.67

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Lowe's

Mailing Address 2150 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Stony Brook	NY	11790

Amount of Each Disbursement this Period

5.40

Purpose of Disbursement
Office suppliesCategory/
Type**Transaction ID : SB17.5488**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. North Shore News Group

Mailing Address 1 Brookside Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
Smithtown	NY	11787

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Newspaper adsCategory/
Type**Transaction ID : SB17.5473**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Piryx

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

2.15

Purpose of Disbursement
Transaction FeeCategory/
Type**Transaction ID : SB17.5511**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

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

1507.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Piryx

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

1.08

Purpose of Disbursement
Transaction FeeCategory/
Type**Transaction ID : SB17.5512**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Piryx

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

1.08

Purpose of Disbursement
Transaction FeeCategory/
Type**Transaction ID : SB17.5513**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Piryx

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

1.08

Purpose of Disbursement
Transaction FeeCategory/
Type**Transaction ID : SB17.5514**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

3.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Piryx

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

21.50

Purpose of Disbursement
Fee**Transaction ID : SB17.5450**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Port Jefferson Village Center

Mailing Address 121 West Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

City	State	Zip Code
Port Jefferson	NY	11777

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
Event Space Rental**Transaction ID : SB17.5449**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Ronkonkoma Post Office

Mailing Address 200 Hawkins Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

City	State	Zip Code
Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

980.00

Purpose of Disbursement
Stamps**Transaction ID : SB17.5497**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

1201.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Ronkonkoma Post Office

Mailing Address 200 Hawkins Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

980.00

Purpose of Disbursement
StampsCategory/
Type**Transaction ID : SB17.5498**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Selden Post Office

Mailing Address 109 College Plaza

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		21		2014

City	State	Zip Code
Selden	NY	11784

Amount of Each Disbursement this Period

18.13

Purpose of Disbursement
StampsCategory/
Type**Transaction ID : SB17.5507**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Chris Shannon

Mailing Address 1 Naro Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
Northport	NY	11768

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
Political Consulting FeeCategory/
Type**Transaction ID : SB17.5490**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

3998.13

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

128.72

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5482

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

112.43

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5483

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

98.83

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5484

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

339.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 46

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

278.42

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5478

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

160.95

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5480

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

47.14

Purpose of Disbursement
Office suppliesCategory/
Type

Transaction ID : SB17.5485

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

486.51

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

43.20

Purpose of Disbursement
Office suppliesCategory/
Type**Transaction ID : SB17.5486**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. Tele Town Hall LLC

Mailing Address 4600 North Fairfax Dr., Suite 802

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

City	State	Zip Code
Arlington	VA	22203

Amount of Each Disbursement this Period

15067.94

Purpose of Disbursement
Tele town hall consultingCategory/
Type**Transaction ID : SB17.5509**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. The Traz Group

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

7867.09

Purpose of Disbursement
Direct MailCategory/
Type**Transaction ID : SB17.5536**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

22978.23

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

3096.02

Transaction ID : SB17.5533

B. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

10412.10

Transaction ID : SB17.5538

c. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

10751.43

Transaction ID : SB17.5537

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

24259.55

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

19681.03

Transaction ID : SB17.5535

B. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

21287.47

Transaction ID : SB17.5534

c. The Traz Group

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement
Direct Mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

4098.15

Transaction ID : SB17.5532

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

45066.65

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Times/Review Newspapers

Mailing Address 7785 Main Rd., PO Box 1500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2014

City	State	Zip Code
Mattituck	NY	11952

Amount of Each Disbursement this Period

846.40

Purpose of Disbursement
Newspaper advertisementCategory/
Type

Transaction ID : SB17.5475

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Times/Review Newspapers

Mailing Address 7785 Main Rd., PO Box 1500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

City	State	Zip Code
Mattituck	NY	11952

Amount of Each Disbursement this Period

846.40

Purpose of Disbursement
Newspaper advertisementCategory/
Type

Transaction ID : SB17.5476

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Times/Review Newspapers

Mailing Address 7785 Main Rd., PO Box 1500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

City	State	Zip Code
Mattituck	NY	11952

Amount of Each Disbursement this Period

846.40

Purpose of Disbursement
Newspaper advertisementCategory/
Type

Transaction ID : SB17.5477

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

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

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

2539.20

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Kevin Tschirhart

Mailing Address 3 drake place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement
Campaign Management Consulting

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

8000.00

Transaction ID : SB17.5442

B. Kevin Tschirhart

Mailing Address 3 drake place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement
Campaign Management Consulting and reimbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

9200.00

Transaction ID : SB17.5443

C. USPS

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
Lake Grove	NY	11755

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5492

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

17700.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Matt Varvaro

Mailing Address 80 Soundview Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

City	State	Zip Code
Port Washington	NY	11050

Purpose of Disbursement
reimbursement - office supplies

Amount of Each Disbursement this Period

443.00

Transaction ID : SB17.5493

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Matt Varvaro

Mailing Address 80 Soundview Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
Port Washington	NY	11050

Purpose of Disbursement
Political Consulting Fee

Amount of Each Disbursement this Period

3900.00

Transaction ID : SB17.5489

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Vertical Response

Mailing Address 50 Beale St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Email service

Amount of Each Disbursement this Period

128.00

Transaction ID : SB17.5448

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

4471.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 161 Centereach Mall

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement
Stamps

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 19 / 2014

Amount of Each Disbursement this Period

196.00

Transaction ID : SB17.5502

B. William Ware and Associates

Mailing Address 311 East 72nd Street

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 09 / 2014

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.5458

C. William Ware and Associates

Mailing Address 311 East 72nd Street

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2014

Amount of Each Disbursement this Period

15000.00

Transaction ID : SB17.5457

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

25196.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. William Ware and Associates

Mailing Address 311 East 72nd Street

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

Amount of Each Disbursement this Period

\$	5000.00
----	---------

Transaction ID : SB17.5459

B. William Ware and Associates

Mailing Address 311 East 72nd Street

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement
GOTV Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2014

Amount of Each Disbursement this Period

\$	4595.00
----	---------

Transaction ID : SB17.5462

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	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).....

9595.00

827445.28

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 41 OF 46

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4100

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

George G Demos

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 27 / 2013

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 42 OF 46

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4495

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

George G Demos

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 30 D

Y 2013 Y Y

M M

D D

Y none Y Y Y

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 43 OF 46

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5545

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

George G Demos

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 23 / 2014

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.5545

This loan came from personal funds. Originally, the box was not checked as such. It was a clerical error.

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

PAGE 45 OF 46

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5546

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

George G Demos

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

250000.00

0.00

250000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
06 / 23 / 2014M M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / noneM M / D D / Y Y Y Y
/ / none

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

250000.00

TOTALS This Period (last page in this line only)..... ►

2500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC/10.5546

This loan came from personal funds. Originally, the box was not checked as such. It was a clerical error.

Form/Schedule:

Transaction ID: