

**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

IMPACT

ADDRESS (number and street)

192 Lexington Ave.

Suite 1001

☐ Check if different
than previously
reported. (ACC)

New York

NY

10016

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00348607

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the
State of

NY

5. Covering Period

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

10

16

2014

through

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

11

24

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 David A. Barrett

Signature of Treasurer

David A. Barrett

[Electronically Filed]

Date

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

12

04

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 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

IMPACT

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		93757.37
(b) Cash on Hand at Beginning of Reporting Period.....	66450.65	
(c) Total Receipts (from Line 19)	51500.22	493944.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	117950.87	587701.74
7. Total Disbursements (from Line 31)	28104.27	497855.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	89846.60	89846.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

IMPACT

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		16		2014

To:

M M	/	D D	/	Y Y Y Y
11		24		2014

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).....

2500.00

18500.00

(ii) Unitemized

0.00

190.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2500.00

18690.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

49000.00

475250.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

51500.00

493940.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.22

4.37

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

51500.22

493944.37

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

51500.22

493944.37

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	23104.27	260855.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23104.27	260855.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	231000.00
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	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	5000.00	6000.00
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	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28104.27	497855.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28104.27	497855.14

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)	51500.00	493940.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51500.00	493940.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	23104.27	260855.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	23104.27	260855.14

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

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

FOR LINE NUMBER: PAGE 6 OF 25

(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)

IMPACT

Full Name (Last, First, Middle Initial)

A. Kenneth C. Frazier

Mailing Address 22 Weatherfield Drive

City State Zip Code
 Newtown PA 18940

FEC ID number of contributing federal political committee.

C

Name of Employer

Merck & Co, Inc.

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 31 2014

Transaction ID : C10299724

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

2500.00

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

2500.00

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 25

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
			☐ 17

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. National Association of Real Estate Investment Trusts, Inc. PAC

Mailing Address 1875 I Street, NW, Suite 600

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing federal political committee.

C C00303339

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
 10 / 31 / 2014

Transaction ID : C10299510

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Gridiron PAC

Mailing Address 345 Park Avenue

City	State	Zip Code
New York	NY	10017

FEC ID number of contributing federal political committee.

C C00451153

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
 10 / 31 / 2014

Transaction ID : C10299721

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. National Cannabis Industry Association PAC

Mailing Address 1244 Grant Street
3rd Floor

City	State	Zip Code
Denver	CO	80210

FEC ID number of contributing federal political committee.

C C00528026

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 19 / 2014

Transaction ID : C10306721

Amount of Each Receipt this Period

1000.00

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

11000.00

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 8 OF 25
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters PAC

Mailing Address 1920 L Street NW
Suite 800

City Washington State DC Zip Code 20036-4201

FEC ID number of contributing federal political committee.

C C00252940

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / **31** / **2014**

Transaction ID : C10299722

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. The Boeing Company PAC

Mailing Address 1200 Wilson Blvd.

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / **22** / **2014**

Transaction ID : C10241402

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Thompson Coburn PAC

Mailing Address 1909 K Street NW
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee.

C C00550491

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / **19** / **2014**

Transaction ID : C10306722

Amount of Each Receipt this Period

1000.00

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

10000.00

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 9 OF 25
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Marsh & McLennan Companies Inc. PAC

Mailing Address 1166 Avenue of the Americas

City State Zip Code
 New York NY 10036

FEC ID number of contributing
federal political committee.

C C00457234

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

11 / **06** / **2014**

Transaction ID : C10302633

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Wellcare Health Plans, Inc. PAC (Wellcare PAC)

Mailing Address 8735 Henderson Road

City State Zip Code
 Tampa FL 33634

FEC ID number of contributing
federal political committee.

C C00390575

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **19** / **2014**

Transaction ID : C10306724

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. National Restaurant Association PAC

Mailing Address 2055 L Street, NW

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00003764

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **27** / **2014**

Transaction ID : C10299506

Amount of Each Receipt this Period

2500.00

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

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

11500.00

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)

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Citigroup Inc. PAC - Federal

Mailing Address 1101 Pennsylvania Ave., NW
Suite 1000

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00008474

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

11 / **12** / **2014**

Transaction ID : C10305256

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Wellpoint, Inc. - WellPAC

Mailing Address 120 Monument Circle

City State Zip Code
Indianapolis IN 46204

FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / **27** / **2014**

Transaction ID : C10299507

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Corning Incorporated Employees PAC

Mailing Address 325 7th St. NW
Suite 600

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00033589

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / **17** / **2014**

Transaction ID : C10241407

Amount of Each Receipt this Period

2500.00

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

9500.00

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)

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Property Casualty Insurers Assn. of America PAC

Mailing Address 8700 West Bryn Mawr
Suite 1200S

City State Zip Code
Chicago IL 60631-3512

FEC ID number of contributing
federal political committee.

C C00066472

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
10 30 2014

Transaction ID : C10299508

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Merck & Co., Inc., Employees PAC (Merck PAC)

Mailing Address 601 Pennsylvania Avenue, NW
North Building, Suite 1200

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00097485

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
10 31 2014

Transaction ID : C10299509

Amount of Each Receipt this Period

5000.00

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) ▼

Aggregate Year-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)..... ►

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

7000.00

49000.00

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Express EMPS

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Credit Card Processing Fee

001

Candidate Name

Category/
Type
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
11 / 05 / 2014
Transaction ID : D557370

Amount of Each Disbursement this Period

19.95

Full Name (Last, First, Middle Initial)

B. Paychex, Inc.Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement
Payroll Fee

001

Candidate Name

Category/
Type
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
11 / 10 / 2014
Transaction ID : D555751

Amount of Each Disbursement this Period

77.00

Full Name (Last, First, Middle Initial)

C. Express EMPS

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Credit Card Processing Fee

001

Candidate Name

Category/
Type
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
11 / 05 / 2014
Transaction ID : D557371

Amount of Each Disbursement this Period

54.06

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

151.01

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

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

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Air Charter Express

Mailing Address 8530 Seneca Turnpike

City State Zip Code
 New Hartford NY 13413

Purpose of Disbursement
 Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Transaction ID : D555753

Amount of Each Disbursement this Period

772.19

Full Name (Last, First, Middle Initial)

B. City of New York

Mailing Address NYC Dept. of Finance
 66 John Street, 12th Floor

City State Zip Code
 New York NY 10038

Purpose of Disbursement
 Transportation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
 11 12 2014

Transaction ID : D555754

Amount of Each Disbursement this Period

247.68

Full Name (Last, First, Middle Initial)

C. City of New York

Mailing Address NYC Dept. of Finance
 66 John Street, 12th Floor

City State Zip Code
 New York NY 10038

Purpose of Disbursement
 Transportation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

Transaction ID : D555755

Amount of Each Disbursement this Period

161.59

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

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

1181.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Air Charter Express

Mailing Address 8530 Seneca Turnpike

City New Hartford State NY Zip Code 13413

Purpose of Disbursement
Travel

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
10 23 2014
Transaction ID : D555736

Amount of Each Disbursement this Period

1994.00

Full Name (Last, First, Middle Initial)

B. Zamir Computer Consulting

Mailing Address 382 Central Park West, Suite 6A

City New York State NY Zip Code 10025

Purpose of Disbursement
Computer Consulting

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
11 11 2014
Transaction ID : D555756

Amount of Each Disbursement this Period

33.00

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212

Purpose of Disbursement
Telephone

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
10 28 2014
Transaction ID : D555737

Amount of Each Disbursement this Period

42.44

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

2069.44

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Flanagan Fulkerson & CompanyMailing Address 220 I Street NE
Suite 250

City Washington State DC Zip Code 20002

Purpose of Disbursement
Consulting Services-Fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 01 / 2014**Transaction ID : D555747**

Amount of Each Disbursement this Period

5000.00

Not for Federal Candidate

Full Name (Last, First, Middle Initial)

B. Verdolino & Lowey, P.C.Mailing Address 124 Washington St.
Suite 101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Professional Services-Accounting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 11 / 2014**Transaction ID : D555757**

Amount of Each Disbursement this Period

944.69

Full Name (Last, First, Middle Initial)

C. Cres Inc.

Mailing Address 192 Lexington Avenue #1205

City New York State NY Zip Code 10016-6823

Purpose of Disbursement
Rent & Utilities

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 29 / 2014**Transaction ID : D555738**

Amount of Each Disbursement this Period

1401.59

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

7346.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Blue Cross Blue Shield

Mailing Address PO Box 659806

City San Antonio State TX Zip Code 78265

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
10 29 2014
Transaction ID : D555739

Amount of Each Disbursement this Period

558.63

Full Name (Last, First, Middle Initial)

B. Perkins CoieMailing Address 1201 Third Ave.
Suite 4800

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Professional Services-Legal

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
11 04 2014
Transaction ID : D555749

Amount of Each Disbursement this Period

88.00

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement
Payroll Payment (See Below)

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
10 31 2014
Transaction ID : D555740

Amount of Each Disbursement this Period

4025.29

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

4671.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Samuel E. BartMailing Address 65 Ainslie St
Apt. 407

City Brooklyn State NY Zip Code 11211-3434

Purpose of Disbursement
Payroll

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
10		31		2014

Transaction ID : D555741

Amount of Each Disbursement this Period

855.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Nicholas KutrybMailing Address 455 W 37th Street
Apt 510

City New York State NY Zip Code 10018

Purpose of Disbursement
Payroll

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
10		31		2014

Transaction ID : D555742

Amount of Each Disbursement this Period

1661.66

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement
Payroll Taxes/Withholdings

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
10		31		2014

Transaction ID : D555743

Amount of Each Disbursement this Period

1508.34

[MEMO ITEM]

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

0.00

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
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Samuel E. BartMailing Address 65 Ainslie St
Apt. 407

City Brooklyn State NY Zip Code 11211-3434

Purpose of Disbursement
Travel Reimbursement, See Below if Itemized

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
10 31 2014**Transaction ID : D555744**

Amount of Each Disbursement this Period

88.50

Full Name (Last, First, Middle Initial)

B. NYC Taxi

Mailing Address 32-02 Queens Blvd.

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Travel

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
10 31 2014**Transaction ID : D555745**

Amount of Each Disbursement this Period

60.00

[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 - See Below if Itemized

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
11 12 2014**Transaction ID : D555758**

Amount of Each Disbursement this Period

3570.37

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

3658.87

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address PO Box 619612

City Dallas State TX Zip Code 75261

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557340

Amount of Each Disbursement this Period

1106.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. UPS Store

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement
Postage

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557301

Amount of Each Disbursement this Period

80.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 2345 Crystal Drive

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557302

Amount of Each Disbursement this Period

426.10

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. UPS Store

Mailing Address 105 East 34th Street

City New York State NY Zip Code 10016

Purpose of Disbursement
Postage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557335

Amount of Each Disbursement this Period

15.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel Credit

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557296

Amount of Each Disbursement this Period

-44.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 12 / 2014
Transaction ID : D557336

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. NYC Taxi

Mailing Address 32-02 Queens Blvd.

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Travel

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
11 / 12 / 2014
Transaction ID : D557329

Amount of Each Disbursement this Period

44.13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

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
11 / 12 / 2014
Transaction ID : D557339

Amount of Each Disbursement this Period

59.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Paychex, Inc.
Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement
Payroll Payment (See Below)

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
11 / 14 / 2014
Transaction ID : D555759

Amount of Each Disbursement this Period

4025.29

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

4025.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Paychex, Inc.Mailing Address Smallbiz Payroll
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement
Payroll Taxes/Withholdings

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
11		14		2014

Transaction ID : D555760

Amount of Each Disbursement this Period

1508.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Samuel E. BartMailing Address 65 Ainslie St
Apt. 407

City Brooklyn State NY Zip Code 11211-3434

Purpose of Disbursement
Payroll

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
11		14		2014

Transaction ID : D555761

Amount of Each Disbursement this Period

855.29

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Nicholas KutrybMailing Address 455 W 37th Street
Apt 510

City New York State NY Zip Code 10018

Purpose of Disbursement
Payroll

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
11		14		2014

Transaction ID : D555762

Amount of Each Disbursement this Period

1661.66

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

23104.27

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

IMPACT

Full Name (Last, First, Middle Initial)

A. Louise Slaughter Re-Election Committee

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11	/	10	/	2014

Mailing Address PO Box 366

City	State	Zip Code
Fairport	NY	14450

Purpose of Disbursement
Recount Donation

011

Transaction ID : D555752

Amount of Each Disbursement this Period

5000.00

Candidate Name

Category/
Type

Office Sought:	☒ House
	☐ Senate
	☐ President

Disbursement For: 2014

☐ Primary ☐ General☒ Other (specify) ▼

Recount Donation

State: NY District: 28

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:

☐ Primary ☐ General☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:

☐ Primary ☐ General☐ Other (specify) ▼

State: District:

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

5000.00

5000.00