

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

New York State Democratic Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		126519.36
(b) Cash on Hand at Beginning of Reporting Period.....	224288.83	
(c) Total Receipts (from Line 19)	135165.00	1017296.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	359453.83	1143815.64
7. Total Disbursements (from Line 31).....	127308.64	911670.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	232145.19	232145.19
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)	24613.55	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

New York State Democratic Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16045.00	30590.00
(ii) Unitemized	625.00	4647.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16670.00	35237.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2900.00	17042.44
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19570.00	52279.94
12. Transfers From Affiliated/Other Party Committees.....	102095.00	368336.39
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	7722.05
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13500.00	251963.62
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	336994.28
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	336994.28
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	135165.00	1017296.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	135165.00	680302.00

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	5862.25	68558.85
(ii) Non-Federal Share.....	33219.43	355575.55
(b) Other Federal Operating Expenditures	5134.59	39764.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44216.27	463899.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	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	20.00
(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	20.00
29. Other Disbursements	7225.00	203045.33
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	75867.37	244706.07
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	75867.37	244706.07
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	127308.64	911670.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94089.21	556094.90

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)	19570.00	52279.94
34. Total Contribution Refunds (from Line 28(d))	0.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19570.00	52259.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10996.84	108323.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7722.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10996.84	100601.45

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

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

Form/Schedule: F3XN
Transaction ID:

Please be advised that the amounts received by the Committee on Line 17 were for access to the Committee's voter file. The amounts charged reflect the prevailing fair market value for access to such data and were based on a survey of comparable vendors.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Paul E. Francis		Date of Receipt MM / DD / YYYY 06 / 06 / 2014 Transaction ID : C5663535
Mailing Address 1384 Park Lane		Amount of Each Receipt this Period 10000.00
City Pelham Manor	State NY	Zip Code 10803
FEC ID number of contributing federal political committee. C		
Name of Employer Cedar Street Group	Occupation Venture Capital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Henry A. Freedman		Date of Receipt MM / DD / YYYY 06 / 06 / 2014 Transaction ID : C5663266
Mailing Address 150 West 96th Street, Apt. 5E		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		
Name of Employer National Center for Law and Economic J	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Lois Jackson		Date of Receipt MM / DD / YYYY 06 / 19 / 2014 Transaction ID : C5663341
Mailing Address 505 Laguardia Pl Apt L4		Amount of Each Receipt this Period 1000.00
City New York	State NY	Zip Code 10012-0045
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	11250.00
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 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Constantine Keremet

Mailing Address 39-44 47th Ave.

City State Zip Code
 Sunnyside NY 11104-3575

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

Name of Employer Occupation
 N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : C5663271

Amount of Each Receipt this Period
 2000.00

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

Mailing Address 21 Ashland Avenue

City State Zip Code
 Pleasantville NY 10570

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

Name of Employer Occupation
 Patton Boggs LLP Attorney

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
 06 / 06 / 2014

Transaction ID : C5663268

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
c. J David Sampson

Mailing Address 44 Elmwood Avenue

City State Zip Code
 East Aurora NY 14052

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

Name of Employer Occupation
 NYS Department of Motor Vehicles Executive Deputy Commissioner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : C5663388

Amount of Each Receipt this Period
 45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4545.00

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 71
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
David William Wang

Mailing Address 59-73 59th Place

City Maspeth State NY Zip Code 11378

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

Name of Employer Starworks LLC Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : C5663265

Amount of Each Receipt this Period
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	16045.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AARON WOOLF FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 248

City ELIZABETHTOWN	State NY	Zip Code 12932
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FEC ID number of contributing federal political committee. **C** C00557611

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

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

Transaction ID : C5663302

Amount of Each Receipt this Period
1400.00

Transfer

B. SEAN ELDRIDGE FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 4113

City KINGSTON	State NY	Zip Code 12402
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00541227

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11554.32

Date of Receipt

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

Transaction ID : C5663270

Amount of Each Receipt this Period
1500.00

Transfer

C.
Full Name (Last, First, Middle Initial)
Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2900.00
TOTAL This Period (last page this line number only).....▶	2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Arthur Alowitz		Date of Receipt MM / DD / YYYY 04 / 24 / 2014 Transaction ID : C5670084
Mailing Address 9 Coyote Ln		Amount of Each Receipt this Period 323.00
City Troy State NY Zip Code 12180-7805	FEC ID number of contributing federal political committee. C	[MEMO ITEM] * NY Party Victory Fund
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date 646.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Arthur Alowitz		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : C5670138
Mailing Address 9 Coyote Ln		Amount of Each Receipt this Period 323.00
City Troy State NY Zip Code 12180-7805	FEC ID number of contributing federal political committee. C	[MEMO ITEM] * NY Party Victory Fund
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date 646.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joshua I Arnow		Date of Receipt MM / DD / YYYY 04 / 24 / 2014 Transaction ID : C5670143
Mailing Address 12 Fancher Rd		Amount of Each Receipt this Period 475.00
City Pound Ridge State NY Zip Code 10576	FEC ID number of contributing federal political committee. C	[MEMO ITEM] * NY Party Victory Fund
Name of Employer Weiller Arnow Mgmt Co Occupation Investment Mgmt	Aggregate Year-to-Date 950.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Roman Bachli
Full Name (Last, First, Middle Initial)
Mailing Address 155 W 68th St Apt 1111

City New York	State NY	Zip Code 10023-5817
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	10	/	2014

Transaction ID : C5670148

Amount of Each Receipt this Period

285.00

[MEMO ITEM]
* NY Party Victory Fund

B. John Balint
Full Name (Last, First, Middle Initial)
Mailing Address 40 Autumn Drive, Apt 234

City Slingerland	State NY	Zip Code 12195
---------------------	-------------	-------------------

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

Name of Employer Albany Medical Center	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt

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

Transaction ID : C5670159

Amount of Each Receipt this Period

237.50

[MEMO ITEM]
* NY Party Victory Fund

C. Catherine Balossi
Full Name (Last, First, Middle Initial)
Mailing Address 266 Corona Ave

City Staten Island	State NY	Zip Code 10306
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.25**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	14	/	2014

Transaction ID : C5670164

Amount of Each Receipt this Period

204.25

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. HENRY BARKHORN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014 Transaction ID : C5670174
Mailing Address 1095 Park Avenue, Apt. 7B		Amount of Each Receipt this Period 475.00
City NEW YORK	State NY	Zip Code 10128-1154
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer Self Employed	Occupation Investment Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) B. Phoebe P. Bender		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : C5670177
Mailing Address 125 Euclid Ave		Amount of Each Receipt this Period 950.00
City Albany	State NY	Zip Code 12203-1826
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer Self Employed	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name (Last, First, Middle Initial) C. Caroline F. Brady		Date of Receipt MM / DD / YYYY 05 / 13 / 2014 Transaction ID : C5670181
Mailing Address 6 Peter Cooper Rd Apt 12E		Amount of Each Receipt this Period 190.00
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		[MEMO ITEM] * NY Party Victory Fund
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Marlin Casker		Date of Receipt MM / DD / YYYY 05 / 02 / 2014
Mailing Address 344 Price St		Transaction ID : C5670199
City Jamestown	State NY	Zip Code 14701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 213.75
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.75	

Full Name (Last, First, Middle Initial) B. Janet Cayenne		Date of Receipt MM / DD / YYYY 04 / 24 / 2014
Mailing Address 793 E 52nd St		Transaction ID : C5670202
City Brooklyn	State NY	Zip Code 11203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer Information Requested	Occupation Information Requested	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) c. Janet Cayenne		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 793 E 52nd St		Transaction ID : C5670203
City Brooklyn	State NY	Zip Code 11203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer Information Requested	Occupation Information Requested	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Paul A Colbert		Date of Receipt MM / DD / YYYY 04 / 14 / 2014
Mailing Address 224 Rombout Road		Transaction ID : C5670204
City Pleasant Valley	State NY	Zip Code 12569
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 190.00
Name of Employer Central Hudson Gas & Electric	Occupation Attorney	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) B. Elizabeth Cospers		Date of Receipt MM / DD / YYYY 06 / 26 / 2014
Mailing Address 15 Seacliff Lane		Transaction ID : C5670205
City Miller Place	State NY	Zip Code 11764-0729
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 237.50
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50	

Full Name (Last, First, Middle Initial) C. Veronica Montgomery Costa		Date of Receipt MM / DD / YYYY 04 / 14 / 2014
Mailing Address 202 Wychem Ct		Transaction ID : C5670206
City Slingerland	State NY	Zip Code 12159
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 285.00
Name of Employer Local 372 -- NYC Board of Education Em	Occupation President	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt
Mailing Address 430 South Capitol Street SE 2nd Floor		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20003		Transaction ID : C5663536
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00000935"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="35430.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="284761.24"/>	

Full Name (Last, First, Middle Initial) B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt
Mailing Address 430 South Capitol Street SE 2nd Floor		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20003		Transaction ID : C5663537
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00000935"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="63445.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="284761.24"/>	

Full Name (Last, First, Middle Initial) C. Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol Street, SE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Washington State DC Zip Code 20003		Transaction ID : C5663572
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00010603"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="3220.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="134868.73"/>	In-Kind: On-Line Voter File Access

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="102095.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
134868.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : C5671943

Amount of Each Receipt this Period
47792.61

[MEMO ITEM]
* NY Party Victory Fund Unitemized

Full Name (Last, First, Middle Initial)
B. Leslie Des Marteau

Mailing Address 38 Park Circle Dr

City Fairport State NY Zip Code 14450-2537

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

Name of Employer Occupation
MS&E, LLP Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2014
Transaction ID : C5670207

Amount of Each Receipt this Period
190.00

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Ramon D. Desposito

Mailing Address 3410 28th Avenue, Apt. 3B

City Astoria State NY Zip Code 11103

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2014
Transaction ID : C5670210

Amount of Each Receipt this Period
190.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Dollars For Democrats		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 430 South Capitol Street, SE		Transaction ID : C5672285
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00073791		Amount of Each Receipt this Period 5967.00
Name of Employer	Occupation	[MEMO ITEM] * Dollars for Democrats Unitemized
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 61101.00	

Full Name (Last, First, Middle Initial) B. Joanne Esposito		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2014
Mailing Address 194 Pine Ridge Dr		Transaction ID : C5670213
City Guilderland	State NY	Zip Code 12084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 190.00
Name of Employer Self Employed	Occupation Physician	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) C. Pedro R Figueroa		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 14 / 2014
Mailing Address 62 3rd St Apt 2		Transaction ID : C5670214
City Brooklyn	State NY	Zip Code 11231
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 142.50
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Pedro R Figueroa

Mailing Address 62 3rd St Apt 2

City State Zip Code
Brooklyn NY 11231

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : C5670215

Amount of Each Receipt this Period
142.50

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
B. PHYLLIS FINNEGAN

Mailing Address 509 ORANGEBURG ROAD

City State Zip Code
PEARL RIVER NY 10965

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

Name of Employer Occupation
JM&F Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : C5670216

Amount of Each Receipt this Period
190.00

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Edna Fraylon

Mailing Address 117-53A 127th Street

City State Zip Code
South Ozone Park NY 11420

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

Name of Employer Occupation
ANH Medicaid Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : C5670217

Amount of Each Receipt this Period
237.50

[MEMO ITEM]
* NY Party Victory Fund

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Mark Getlein
Full Name (Last, First, Middle Initial)

Mailing Address 262 W 107th St Apt 7C

City New York	State NY	Zip Code 10025
------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Writer
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	14	/	2014

Transaction ID : C5670218

Amount of Each Receipt this Period
475.00

[MEMO ITEM]
* NY Party Victory Fund

B. Adelaide P. Gomer
Full Name (Last, First, Middle Initial)

Mailing Address 513 Wyckoff Rd

City Ithaca	State NY	Zip Code 14850-2309
----------------	-------------	------------------------

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

Name of Employer Park Foundation	Occupation President
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	15	/	2014

Transaction ID : C5672279

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
* Dollars for Democrats

C. Virginia Gray
Full Name (Last, First, Middle Initial)

Mailing Address 125 W 12th St Apt 5C

City New York	State NY	Zip Code 10011-8269
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
484.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	14	/	2014

Transaction ID : C5670220

Amount of Each Receipt this Period
484.50

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 55 5th Ave
FI 15

City State Zip Code
New York NY 10003-4301

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

Name of Employer Occupation
Time Equities, Inc. Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt
MM / DD / YYYY
04 / 08 / 2014

Transaction ID : **C5671883**

Amount of Each Receipt this Period
237.50

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
B. Frederic Guile

Mailing Address 93 Maine Rd

City State Zip Code
Plattsburgh NY 12903

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2014

Transaction ID : **C5671884**

Amount of Each Receipt this Period
95.00

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Frederic Guile

Mailing Address 93 Maine Rd

City State Zip Code
Plattsburgh NY 12903

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2014

Transaction ID : **C5671885**

Amount of Each Receipt this Period
95.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Peter R. Haje
Full Name (Last, First, Middle Initial)

Mailing Address 44 W 77th Street

City New York State NY Zip Code 10024-5150

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

Name of Employer Self Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 04 / 14 / 2014
Transaction ID : C5671886

Amount of Each Receipt this Period 950.00

[MEMO ITEM]
* NY Party Victory Fund

B. Joseph Hall
Full Name (Last, First, Middle Initial)

Mailing Address 1 Pier Pointe St Apt 615

City Yonkers State NY Zip Code 10701

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

Name of Employer Children's and Women Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt 06 / 26 / 2014
Transaction ID : C5671887

Amount of Each Receipt this Period 190.00

[MEMO ITEM]
* NY Party Victory Fund

C. Arelen Handel
Full Name (Last, First, Middle Initial)

Mailing Address 145 Bayview Ave

City Northport State NY Zip Code 11768

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt 04 / 24 / 2014
Transaction ID : C5671889

Amount of Each Receipt this Period 237.50

[MEMO ITEM]
* NY Party Victory Fund

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robert P. Heinrich
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 Buckingham Pl
 City Lynbrook State NY Zip Code 11563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 190.00

Date of Receipt 06 / 12 / 2014
Transaction ID : C5671892
 Amount of Each Receipt this Period 190.00
[MEMO ITEM]
 * NY Party Victory Fund

B. Harvey S Horn
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Pine Tree Rd
 City Monroe State NY Zip Code 10950-3967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 190.00

Date of Receipt 04 / 02 / 2014
Transaction ID : C5671893
 Amount of Each Receipt this Period 190.00
[MEMO ITEM]
 * NY Party Victory Fund

C. Richard Hulbert
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 Henry St
 City Brooklyn State NY Zip Code 11201-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 04 / 14 / 2014
Transaction ID : C5671895
 Amount of Each Receipt this Period 950.00
[MEMO ITEM]
 * NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Samuel L Hunt
Full Name (Last, First, Middle Initial)
Mailing Address 13336 Garrett St
City State Zip Code
Jamaica NY 11434
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 190.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014
Transaction ID : C5671897
Amount of Each Receipt this Period
190.00
[MEMO ITEM]
* NY Party Victory Fund

B. Myrna Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 140 Alcott Pl Apt 6C
City State Zip Code
Bronx NY 10475-4343
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 190.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 14 / 2014
Transaction ID : C5671898
Amount of Each Receipt this Period
95.00
[MEMO ITEM]
* NY Party Victory Fund

C. Myrna Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 140 Alcott Pl Apt 6C
City State Zip Code
Bronx NY 10475-4343
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 190.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014
Transaction ID : C5671899
Amount of Each Receipt this Period
95.00
[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Joan S. Katsky
Full Name (Last, First, Middle Initial)

Mailing Address 25 Tudor City Place Apt 2201

City New York	State NY	Zip Code 10017-6882
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Writer
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt

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

Transaction ID : C5671901

Amount of Each Receipt this Period
237.50

[MEMO ITEM]
* NY Party Victory Fund

B. Leslie A Kory
Full Name (Last, First, Middle Initial)

Mailing Address 330 E 33rd St Apt 17J

City New York	State NY	Zip Code 10016
------------------	-------------	-------------------

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

Name of Employer PAGNY	Occupation Physician
---------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2014

Transaction ID : C5671903

Amount of Each Receipt this Period
475.00

[MEMO ITEM]
* NY Party Victory Fund

C. Francois Laguerre
Full Name (Last, First, Middle Initial)

Mailing Address 480 W 151st St
Unit 32

City New York	State NY	Zip Code 10031
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2014

Transaction ID : C5671905

Amount of Each Receipt this Period
190.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Elwood Largis

Mailing Address 118 Highview Ave

City Nanuet State NY Zip Code 10954-3367

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2014

Transaction ID : C5671906

Amount of Each Receipt this Period
190.00

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
B. Paul P. Lawrence

Mailing Address 8253 166th St

City Jamaica State NY Zip Code 11432-1820

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : C5671907

Amount of Each Receipt this Period
285.00

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Marguerite S. Lederberg

Mailing Address 504 E. 63rd St Apt 32P

City New York State NY Zip Code 10065

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

Name of Employer Memorial Sloan Kettering Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : C5671908

Amount of Each Receipt this Period
475.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Elizabeth McCormack
Full Name (Last, First, Middle Initial)

Mailing Address 870 United Nations Plaza, Apt. 21A

City New York State NY Zip Code 10017-1818

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

Name of Employer Rockefeller Family Occupation Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : C5671910

Amount of Each Receipt this Period
475.00

[MEMO ITEM]
* NY Party Victory Fund

B. HENRIETTE MONTGOMERY
Full Name (Last, First, Middle Initial)

Mailing Address 31 E 79TH STREET APT 6E

City NEW YORK State NY Zip Code 10075

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.75

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : C5671911

Amount of Each Receipt this Period
213.75

[MEMO ITEM]
* NY Party Victory Fund

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

Mailing Address 140 Hollywood Dr

City Oakdale State NY Zip Code 11769-2434

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : C5671912

Amount of Each Receipt this Period
95.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Tom Mowdy		Date of Receipt MM / DD / YYYY 05 / 13 / 2014
Mailing Address 140 Hollywood Dr		Transaction ID : C5671913
City Oakdale	State NY	Zip Code 11769-2434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) B. Charlotte T Pesklak		Date of Receipt MM / DD / YYYY 04 / 24 / 2014
Mailing Address 2 N Park Pl		Transaction ID : C5671914
City Herkimer	State NY	Zip Code 13350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name (Last, First, Middle Initial) C. Charlotte T Pesklak		Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 2 N Park Pl		Transaction ID : C5671915
City Herkimer	State NY	Zip Code 13350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.00
Name of Employer N/A	Occupation Retired	[MEMO ITEM] * NY Party Victory Fund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Molitus Petit-Michel

Mailing Address 3 Welling Way

City Coram State NY Zip Code 11727-1016

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.75

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : C5671917

Amount of Each Receipt this Period
213.75

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
B. Harry Phillips

Mailing Address 71 Hawthorne Way

City Hartsdale State NY Zip Code 10530-3020

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

Name of Employer Occupation
Phillips Compensation Plans NY, Inc. Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : C5671918

Amount of Each Receipt this Period
237.50

[MEMO ITEM]
* NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Coles H Phinizy Jr.

Mailing Address One Gracie Terrace, Apt. 3H

City New York State NY Zip Code 10028

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

Name of Employer Occupation
US EPA Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 12 / 2014

Transaction ID : C5671920

Amount of Each Receipt this Period
285.00

[MEMO ITEM]
* NY Party Victory Fund

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. JULIA QUAGLIATA

Mailing Address **PO Box 2783**

City **Setauket** State **NY** Zip Code **11733**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt

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

Transaction ID : C5671921

Amount of Each Receipt this Period

2	8	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
 * NY Party Victory Fund

Full Name (Last, First, Middle Initial)
B. Nan A. Rothschild

Mailing Address **955 Lexington Ave #6A**

City **New York** State **NY** Zip Code **10021-5128**

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

Name of Employer **Columbia University** Occupation **Professor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3467.50**

Date of Receipt

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

Transaction ID : C5671923

Amount of Each Receipt this Period

3	4	6	.	7	.	5	0
---	---	---	---	---	---	---	---

[MEMO ITEM]
 * NY Party Victory Fund

Full Name (Last, First, Middle Initial)
C. Anita M Samuels

Mailing Address **155 Fishermans Beach Road**

City **Cutchogue** State **NY** Zip Code **11935**

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

Name of Employer **Self Employed** Occupation **Artist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.50**

Date of Receipt

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

Transaction ID : C5671924

Amount of Each Receipt this Period

2	3	7	.	5	0
---	---	---	---	---	---

[MEMO ITEM]
 * NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Robert A Scott
Full Name (Last, First, Middle Initial)
Mailing Address 55 Brompton Rd
City Garden City State NY Zip Code 11530
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 190.00

Date of Receipt 04 / 14 / 2014
Transaction ID : **C5671925**
Amount of Each Receipt this Period 190.00
[MEMO ITEM]
* NY Party Victory Fund

B. Blair S Scribner
Full Name (Last, First, Middle Initial)
Mailing Address 215 E 68th St Apt 24J
City New York State NY Zip Code 10065-5729
FEC ID number of contributing federal political committee. **C**
Name of Employer Bulging School Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 04 / 14 / 2014
Transaction ID : **C5671927**
Amount of Each Receipt this Period 285.00
[MEMO ITEM]
* NY Party Victory Fund

C. George B. Simpson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 669
City Bronx State NY Zip Code 10469-0669
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 213.75

Date of Receipt 04 / 24 / 2014
Transaction ID : **C5671930**
Amount of Each Receipt this Period 213.75
[MEMO ITEM]
* NY Party Victory Fund

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Richard Stearns
Full Name (Last, First, Middle Initial)
Mailing Address 66 Bittersweet Ln
City Slingerlands State NY Zip Code 12159
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt 06 / 12 / 2014
Transaction ID : C5671933
Amount of Each Receipt this Period 475.00
[MEMO ITEM]
* NY Party Victory Fund

B. Kenneth Steiner
Full Name (Last, First, Middle Initial)
Mailing Address 14 Stoner Avenue, Apt. 2M
City Great Neck State NY Zip Code 11021-2100
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Investments
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 190.00

Date of Receipt 06 / 12 / 2014
Transaction ID : C5671934
Amount of Each Receipt this Period 190.00
[MEMO ITEM]
* NY Party Victory Fund

C. Maury Tigner
Full Name (Last, First, Middle Initial)
Mailing Address 103 Campbell Ave
City Ithaca State NY Zip Code 14850
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 712.50

Date of Receipt 04 / 24 / 2014
Transaction ID : C5671936
Amount of Each Receipt this Period 475.00
[MEMO ITEM]
* NY Party Victory Fund

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

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

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

FOR LINE NUMBER: PAGE 33 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
William J. Williams Jr.

Mailing Address 570 Park Ave

City State Zip Code
 New York NY 10065-7343

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

Name of Employer Occupation
 N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : C5671940

Amount of Each Receipt this Period
 2375.00

[MEMO ITEM]
 * NY Party Victory Fund

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	102095.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 71
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Friends of Rebecca Seawright		Date of Receipt
Mailing Address 500 East 85th Street Apt 21		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10028
FEC ID number of contributing federal political committee.		Transaction ID : C5663272
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1500.00"/>
Name of Employer	Occupation	Voter File Access
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Friends of Senator Breslin		Date of Receipt
Mailing Address P.O. Box 144		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Clarksville	NY	12041
FEC ID number of contributing federal political committee.		Transaction ID : C5663256
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="3500.00"/>
Name of Employer	Occupation	Voter File Access
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

Full Name (Last, First, Middle Initial) C. Jackson for Senate		Date of Receipt
Mailing Address 579 West 215th Street Apt 10H		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
New York	NY	10034
FEC ID number of contributing federal political committee.		Transaction ID : C5663375
FEC ID number: <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="3500.00"/>
Name of Employer	Occupation	Voter File Access
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 71
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

A. Farouk Samaroo
Full Name (Last, First, Middle Initial)
Mailing Address 104-32 94th Ave
City Richmond Hill State NY Zip Code 11419
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 12 / 2014
Transaction ID : C5663276
Amount of Each Receipt this Period
1500.00
Voter File Access

B. Sanders for Senate
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 364
City Far Rockaway State NY Zip Code 11691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 03 / 2014
Transaction ID : C5663258
Amount of Each Receipt this Period
3500.00
Voter File Access

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	13500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2014

Transaction ID : D403639

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2014

Transaction ID : D403640

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : D403580

Amount of Each Disbursement this Period

124.44

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

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

126.42

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	4

Transaction ID : D403587

Amount of Each Disbursement this Period

2	.	9	7
---	---	---	---

Full Name (Last, First, Middle Initial)

B. BMCC - Auxiliary Enterprises Corp

Mailing Address 199 Chambers Street, Room S711

City New York State NY Zip Code 10007

Purpose of Disbursement
Space Rental

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
0	6		2	6		2	0	1	4

Transaction ID : D403855

Amount of Each Disbursement this Period

9	7	0	0
---	---	---	---

Full Name (Last, First, Middle Initial)

C. Cablevision

Mailing Address PO Box 371378

City Pittsburgh State PA Zip Code 15250-7378

Purpose of Disbursement
Telephone & Internet

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
0	6		3	0		2	0	1	4

Transaction ID : D403856

Amount of Each Disbursement this Period

3	2	3	2
---	---	---	---

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

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

1	2	9	6
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Democracy Engine LLC

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2014

Transaction ID : D403633

Amount of Each Disbursement this Period

43.30

Full Name (Last, First, Middle Initial)

B. Democracy Engine LLC

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : D403581

Amount of Each Disbursement this Period

10.70

Full Name (Last, First, Middle Initial)

C. Democracy Engine LLC

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2014

Transaction ID : D403579

Amount of Each Disbursement this Period

1.20

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

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

55.20

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Democracy Engine LLC

Mailing Address 850 Quincy St, NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403641

Amount of Each Disbursement this Period

4.90

Full Name (Last, First, Middle Initial)

B. Democratic National Committee

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
On-Line Voter File Access

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403656

Amount of Each Disbursement this Period

3220.00

* In-Kind Received

Full Name (Last, First, Middle Initial)

C. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403925

Amount of Each Disbursement this Period

135.56

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

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

3360.46

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2014

Transaction ID : D403927

Amount of Each Disbursement this Period

76.92

Full Name (Last, First, Middle Initial)

B. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2014

Transaction ID : D403929

Amount of Each Disbursement this Period

18.33

Full Name (Last, First, Middle Initial)

C. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2014

Transaction ID : D403931

Amount of Each Disbursement this Period

42.78

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

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

138.03

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403932

Amount of Each Disbursement this Period

66.45

Full Name (Last, First, Middle Initial)

B. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403934

Amount of Each Disbursement this Period

91.84

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

158.29

5134.59

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. NYSDC Housekeeping Account

Mailing Address 424 Madison Avenue

City New York State NY Zip Code 10008

Purpose of Disbursement
Fed Trsfr to Non-Fed Acct for Friends of Senator Breslin's 6/2/14 VAN payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 03 / 2014

Transaction ID : D403665

Amount of Each Disbursement this Period

2975.00

Full Name (Last, First, Middle Initial)

B. NYSDC Housekeeping Account

Mailing Address 424 Madison Avenue

City New York State NY Zip Code 10008

Purpose of Disbursement
Fed Trsfr to Non-Fed Acct for Sanders for Senate's 6/3/14 VAN payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403677

Amount of Each Disbursement this Period

2975.00

Full Name (Last, First, Middle Initial)

C. NYSDC Housekeeping Account

Mailing Address 424 Madison Avenue

City New York State NY Zip Code 10008

Purpose of Disbursement
Fed Trsfr to Non-Fed Acct for Farouk Samaroo's 6/12/14 VAN payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D403681

Amount of Each Disbursement this Period

1275.00

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

7225.00

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

7225.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Christopher T Alexander		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 104-29 - 205 Place		Transaction ID : D403766
City Queens	State NY	
Purpose of Disbursement Wages	Candidate Name	Amount of Each Disbursement this Period 1696.79
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Christopher T Alexander		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 104-29 - 205 Place		Transaction ID : D403811
City Queens	State NY	
Purpose of Disbursement Wages	Candidate Name	Amount of Each Disbursement this Period 1696.79
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Robert T Barber		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 24 Pierrepont Avenue		Transaction ID : D403812
City Potsdam	State NY	
Purpose of Disbursement Wages	Candidate Name	Amount of Each Disbursement this Period 821.01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	4214.59
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Robert T Barber

Mailing Address 24 Pierrepont Avenue

City Potsdam State NY Zip Code 13676

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403814

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Benjamin T Bills

Mailing Address 7331 Eelpot Road

City Naples State NY Zip Code 14512

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403815

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Benjamin T Bills

Mailing Address 7331 Eelpot Road

City Naples State NY Zip Code 14512

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403767

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Eva M Carafa

Mailing Address 527 Allen St

City Syracuse State NY Zip Code 13210

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403768

Amount of Each Disbursement this Period

1009.13

Full Name (Last, First, Middle Initial)

B. Eva M Carafa

Mailing Address 527 Allen St

City Syracuse State NY Zip Code 13210

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403818

Amount of Each Disbursement this Period

1009.14

Full Name (Last, First, Middle Initial)

C. Augusta Y Christensen

Mailing Address 210 W State St Apt 3

City Ithaca State NY Zip Code 14850

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403820

Amount of Each Disbursement this Period

928.51

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

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

2946.78

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Augusta Y Christensen

Mailing Address 210 W State St Apt 3

City Ithaca State NY Zip Code 14850

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403769

Amount of Each Disbursement this Period

928.52

Full Name (Last, First, Middle Initial)

B. Michael R Debaise

Mailing Address 1512 Park St

City Syracuse State NY Zip Code 13208

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403770

Amount of Each Disbursement this Period

928.51

Full Name (Last, First, Middle Initial)

C. Michael R Debaise

Mailing Address 1512 Park St

City Syracuse State NY Zip Code 13208

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403822

Amount of Each Disbursement this Period

928.50

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

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

2785.53

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Anna C Dore

Mailing Address 4321 Ashby Avenue

City State Zip Code
Des Moines IA 50310

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403824

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Anna C Dore

Mailing Address 4321 Ashby Avenue

City State Zip Code
Des Moines IA 50310

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403771

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sean P Finn

Mailing Address 20 Songsparrow Lane

City State Zip Code
Centereach NY 11720

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403772

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Sean P Finn

Mailing Address 20 Songsparrow Lane

City State Zip Code
Centereach NY 11720

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403825

Amount of Each Disbursement this Period

877.98

Full Name (Last, First, Middle Initial)

B. Jenny L Fischman

Mailing Address 81 Oakdale Street

City State Zip Code
Staten Island NY 10308

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403827

Amount of Each Disbursement this Period

876.36

Full Name (Last, First, Middle Initial)

C. Jenny L Fischman

Mailing Address 81 Oakdale Street

City State Zip Code
Staten Island NY 10308

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403773

Amount of Each Disbursement this Period

876.37

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

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

2630.71

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Randall J Franklin

Mailing Address 198 Peconic Ave

City Medford State NY Zip Code 11763

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403774

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Randall J Franklin

Mailing Address 198 Peconic Ave

City Medford State NY Zip Code 11763

Purpose of Disbursement
Wages & Gas Stipend

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403828

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jason R Henry

Mailing Address 950 Brintell Street

City Pittsburgh State PA Zip Code 15201

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403829

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Jason R Henry

Mailing Address 950 Brintell Street

City Pittsburgh State PA Zip Code 15201

Purpose of Disbursement
Wages & Health Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403779

Amount of Each Disbursement this Period

1896.79

Full Name (Last, First, Middle Initial)

B. Ernest S Klepeis

Mailing Address 55 River Road

City New Paltz State NY Zip Code 12561

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403830

Amount of Each Disbursement this Period

306.55

Full Name (Last, First, Middle Initial)

C. Ernest S Klepeis

Mailing Address 55 River Road

City New Paltz State NY Zip Code 12561

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403831

Amount of Each Disbursement this Period

903.25

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

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

3106.59

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Russell Leibowitz

Mailing Address 403 Mountain Ridge Drive

City State Zip Code
Mount Sinai NY 11766

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403832

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Russell Leibowitz

Mailing Address 403 Mountain Ridge Drive

City State Zip Code
Mount Sinai NY 11766

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403781

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Adin Lenchner

Mailing Address 800 Riverside Drive Apt Dup-E

City State Zip Code
New York NY 10032

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403784

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Adin Lenchner

Mailing Address 800 Riverside Drive Apt Dup-E

City State Zip Code
New York NY 10032

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403834

Amount of Each Disbursement this Period

1542.56

Full Name (Last, First, Middle Initial)

B. Kimberley C Maier

Mailing Address 40-A Alton Ave

City State Zip Code
Greenlawn NY 11740

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403836

Amount of Each Disbursement this Period

903.26

Full Name (Last, First, Middle Initial)

C. Kimberley C Maier

Mailing Address 40-A Alton Ave

City State Zip Code
Greenlawn NY 11740

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403787

Amount of Each Disbursement this Period

903.25

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

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

3349.07

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Jesse E Manning

Mailing Address 1665 East 31st Street

City State Zip Code
Brooklyn NY 11234

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403837

Amount of Each Disbursement this Period

373.80

Full Name (Last, First, Middle Initial)

B. Kailey M McGarvey

Mailing Address 27 Boat Lane

City State Zip Code
Levittown NY 11756

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403839

Amount of Each Disbursement this Period

903.25

Full Name (Last, First, Middle Initial)

C. Kailey M McGarvey

Mailing Address 27 Boat Lane

City State Zip Code
Levittown NY 11756

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403790

Amount of Each Disbursement this Period

903.25

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

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

2180.30

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Cory J Miller

Mailing Address 258 Montgomery St Floor 1

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403793

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Cory J Miller

Mailing Address 258 Montgomery St Floor 1

City Newburgh State NY Zip Code 12550

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403840

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Taxes/Withholdings

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403808

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAYCHEX

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

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
Payroll Taxes/Withholdings

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403853

Amount of Each Disbursement this Period

13120.68

Full Name (Last, First, Middle Initial)

B. Natalie M Ryan

Mailing Address 12 Cedar Drive

City Farmingdale State NY Zip Code 11735

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D403843

Amount of Each Disbursement this Period

903.25

Full Name (Last, First, Middle Initial)

C. Natalie M Ryan

Mailing Address 12 Cedar Drive

City Farmingdale State NY Zip Code 11735

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014

Transaction ID : D403794

Amount of Each Disbursement this Period

903.25

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

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

14927.18

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Nathaniel V Salzman

Mailing Address 540 Clover Hills Drive

City Rochester State NY Zip Code 14618

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : D403795

Amount of Each Disbursement this Period

611.23

Full Name (Last, First, Middle Initial)

B. Nathaniel V Salzman

Mailing Address 540 Clover Hills Drive

City Rochester State NY Zip Code 14618

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : D403844

Amount of Each Disbursement this Period

953.57

Full Name (Last, First, Middle Initial)

C. Evan R Seltzer

Mailing Address 124 Raymond Ave
Town House 164

City Poughkeepsie State NY Zip Code 12604

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : D403846

Amount of Each Disbursement this Period

877.99

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

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

2442.79

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Evan R Seltzer

Mailing Address 124 Raymond Ave
Town House 164

City Poughkeepsie State NY Zip Code 12604

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403798

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Timi T Thomas

Mailing Address 23 Drysdale St

City Staten Island State NY Zip Code 10314

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403800

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Lauren F Thorpe

Mailing Address 2753 Route 9

City Cold Spring State NY Zip Code 10516

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403803

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

A. Lauren F Thorpe

Mailing Address 2753 Route 9

City Cold Spring State NY Zip Code 10516

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403804

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Lauren F Thorpe

Mailing Address 2753 Route 9

City Cold Spring State NY Zip Code 10516

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403847

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Miriam K Tohill

Mailing Address 14 Ogden Road

City Ithaca State NY Zip Code 14850

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403848

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Miriam K Tohill

Mailing Address 14 Ogden Road

City Ithaca State NY Zip Code 14850

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403805

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Steven Tucker

Mailing Address 3007 Rickard Rd

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403807

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Steven Tucker

Mailing Address 3007 Rickard Rd

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403849

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Coleman P Younger

Mailing Address 280 Riverside Drive Apt 5A

City New York State NY Zip Code 10025

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403851

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Coleman P Younger

Mailing Address 280 Riverside Drive Apt 5A

City New York State NY Zip Code 10025

Purpose of Disbursement
Wages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : D403852

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 61 OF 71
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

Outstanding Balance Beginning This Period 24613.55	Transaction ID : D1365	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24613.55

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	24613.55
2) TOTALS This Period (last page this line number only)..... ▶	24613.55
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	24613.55

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : D403700 AmTrust North America, Inc. Mailing Address P.O. Box 318004		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Cleveland OH 44131-8004	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Workers Compensation	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 06 / 24 / 2014	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 220.20 <input type="text"/> 1247.80 <input type="text"/> 1468.00			

B. Full Name (Last, First, Middle Initial) Transaction ID : D403699 Capital One Bank Mailing Address 424 Madison Avenue		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code New York NY 10017	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Bank Charge	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 06 / 24 / 2014	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 76.31 <input type="text"/> 432.42 <input type="text"/> 508.73			

C. Full Name (Last, First, Middle Initial) Transaction ID : D403663 De Lage Landen Mailing Address PO Box 41602		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Philadelphia PA 19101-1602	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Equipment Lease	<input type="text"/> Category/ Type	Date <input type="text"/> / <input type="text"/> / <input type="text"/> 06 / 02 / 2014	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text"/> 36.58 <input type="text"/> 207.30 <input type="text"/> 243.88			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text"/> 333.09		<input type="text"/> 1887.52		<input type="text"/> 2220.61

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: GE Capital. Transaction ID: D403692. Allocated Activity or Event: Administrative. Date: 06/19/2014. Purpose: Equipment Lease. Amounts: FEDERAL SHARE 42.46, NONFEDERAL SHARE 240.62, TOTAL AMOUNT 283.08.

Form B: Isabelle M. Parker. Transaction ID: D403671. Allocated Activity or Event: Administrative. Date: 06/04/2014. Purpose: Wages. Amounts: FEDERAL SHARE 219.92, NONFEDERAL SHARE 1246.21, TOTAL AMOUNT 1466.13.

Form C: Isabelle M. Parker. Transaction ID: D403686. Allocated Activity or Event: Administrative. Date: 06/18/2014. Purpose: Wages. Amounts: FEDERAL SHARE 219.92, NONFEDERAL SHARE 1246.21, TOTAL AMOUNT 1466.13.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 482.30, 2733.04, 3215.34.

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

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

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Leah J Gonzalez		Transaction ID : D403683		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 335 E 86th Street Apt 5C				Allocated Activity or Event Year-To-Date 424134.40		
City New York	State NY	Zip Code 10028		Date 06 / 18 / 2014		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
330.68			1873.83			2204.51

B. Full Name (Last, First, Middle Initial) Leslie Ng		Transaction ID : D403670		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd				Allocated Activity or Event Year-To-Date 424134.40		
City East Brunswick	State NJ	Zip Code 08816-1103		Date 06 / 04 / 2014		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
238.16			1349.58			1587.74

C. Full Name (Last, First, Middle Initial) Leslie Ng		Transaction ID : D403685		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd				Allocated Activity or Event Year-To-Date 424134.40		
City East Brunswick	State NJ	Zip Code 08816-1103		Date 06 / 18 / 2014		
Purpose of Disbursement: Wages		Category/ Type				
Activity or Event Identifier: Administrative						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
238.16			1349.59			1587.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
807.00		4573.00		5380.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : D403673 NYS Child Support Processing Center (SDU) Mailing Address PO Box 15363		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Albany NY 12212-5363	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Child Support	<input type="checkbox"/> Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="58.16"/> + <input type="text" value="329.56"/> = <input type="text" value="387.72"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : D403689 NYS Child Support Processing Center (SDU) Mailing Address PO Box 15363		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Albany NY 12212-5363	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Child Support	<input type="checkbox"/> Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="58.15"/> + <input type="text" value="329.54"/> = <input type="text" value="387.69"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : D403678 Oxford Health Plans Mailing Address P.O. Box 1697		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City State Zip Code Newark NJ 07101-1697	Allocated Activity or Event Year-To-Date 424134.40		
Purpose of Disbursement: Health Insurance	<input type="checkbox"/> Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>	
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="764.13"/> + <input type="text" value="4330.07"/> = <input type="text" value="5094.20"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="880.44"/>		<input type="text" value="4989.17"/>		<input type="text" value="5869.61"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) PAYCHEX		Transaction ID : D403674	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 424134.40	
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Taxes/Withholdings		<input type="text"/>		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="702.70"/>			<input type="text" value="3981.95"/>	<input type="text" value="4684.65"/>

B. Full Name (Last, First, Middle Initial) PAYCHEX		Transaction ID : D403924	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 424134.40	
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Service		<input type="text"/>		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="19.71"/>			<input type="text" value="111.70"/>	<input type="text" value="131.41"/>

C. Full Name (Last, First, Middle Initial) PAYCHEX		Transaction ID : D403690	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 424134.40	
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Taxes/Withholdings		<input type="text"/>		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="836.61"/>			<input type="text" value="4740.76"/>	<input type="text" value="5577.37"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1559.02"/>		<input type="text" value="8834.41"/>		<input type="text" value="10393.43"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : D403698 Remarketing Solutions International		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 5 Connair Road		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Orange CT 06477		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Freight Move		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
44.21 + 250.54 = 294.75			

B. Full Name (Last, First, Middle Initial) Transaction ID : D403669 Richard J. Horner Jr.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 767 Mineral Springs Rd.		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code West Seneca NY 14224		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
268.54 + 1521.76 = 1790.30			

C. Full Name (Last, First, Middle Initial) Transaction ID : D403684 Richard J. Horner Jr.		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 767 Mineral Springs Rd.		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code West Seneca NY 14224		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
268.55 + 1521.80 = 1790.35			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
581.30		3294.10		3875.40

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Rodney S Capel, Transaction ID: D403667. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Wages), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (424134.40). Summary: FEDERAL SHARE 263.14, NONFEDERAL SHARE 1491.16, TOTAL AMOUNT 1754.30.

Form B: Schmutter, Strull, Fleisch Inc., Transaction ID: D403680. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Insurance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (424134.40). Summary: FEDERAL SHARE 256.05, NONFEDERAL SHARE 1450.95, TOTAL AMOUNT 1707.00.

Form C: Thomas J Giordano, Transaction ID: D403668. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Wages), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), and Year-To-Date amounts (424134.40). Summary: FEDERAL SHARE 237.78, NONFEDERAL SHARE 1347.42, TOTAL AMOUNT 1585.20.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 756.97, NONFEDERAL SHARE 4289.53, TOTAL AMOUNT 5046.50.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) Transaction ID : D403682 Thomas J Giordano		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 309 Columbus Ave Apt 4C		Allocated Activity or Event Year-To-Date 424134.40	
City State Zip Code New York NY 10023	Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
237.78 + 1347.40 = 1585.18			

B. Full Name (Last, First, Middle Initial) Transaction ID : D403664 TriSource Solutions LLC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5405 Utica Ridge Road, Suite 208		Allocated Activity or Event Year-To-Date 424134.40	
City State Zip Code Davenport IA 52807	Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Credit Card Fee		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
7.65 + 43.34 = 50.99			

C. Full Name (Last, First, Middle Initial) Transaction ID : D403672 Willard F Younger		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 E 14thSt Apt D		Allocated Activity or Event Year-To-Date 424134.40	
City State Zip Code New York NY 10003	Category/ Type	Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Wages		Allocated Activity or Event Year-To-Date 424134.40	
Activity or Event Identifier: Administrative		Date <input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
108.35 + 613.96 = 722.31			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
353.78		2004.70		2358.48

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Form A: Willard F Younger, Transaction ID: D403688. Includes fields for Name, Address, City/State/Zip, Purpose (Wages), Activity (Administrative), Date (06/18/2014), and Amounts (FEDERAL SHARE: 108.35, NONFEDERAL SHARE: 613.96, TOTAL AMOUNT: 722.31).

Form B: Empty fields for Name, Address, City/State/Zip, Purpose, Activity, Date, and Amounts.

Form C: Empty fields for Name, Address, City/State/Zip, Purpose, Activity, Date, and Amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for Subtotal: FEDERAL SHARE (108.35) + NONFEDERAL SHARE (613.96) = TOTAL AMOUNT (722.31)

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

Summary table for Total: FEDERAL SHARE (5862.25) + NONFEDERAL SHARE (33219.43) = TOTAL AMOUNT (39081.68)

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID : SchedL1

NAME OF COMMITTEE (In Full) New York State Democratic Committee		
NAME OF ACCOUNT Levin account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	0.00	0.00
(b) Unitemized	0.00	0.00
(c) Total	0.00	0.00
2. OTHER RECEIPTS	0.00	0.00
3. TOTAL RECEIPTS (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0.00	0.00
(b) Voter ID	0.00	0.00
(c) GOTV	0.00	0.00
(d) Generic Campaign	0.00	0.00
(e) Total	0.00	0.00
5. OTHER DISBURSEMENTS	0.00	0.00
6. TOTAL DISBURSEMENTS (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	189.58	189.58
8. RECEIPTS (from Line 3)	0.00	0.00
9. SUBTOTAL (Add Lines 7 and 8)	189.58	189.58
10. DISBURSEMENTS (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND (Subtract Line 10 From Line 9)	189.58	189.58