PAGE 1 / 10

Image# 14941857671

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man har had	nonzea committee	Office Use Only
NAME OF TOMORDO     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
New York 2014			
<u> </u>			
ADDRESS (number and street)	14 Sylvester Street		
Check if different	PO Box 474		
than previously reported. (ACC)	Kinderhook		NY 12106
2. FEC IDENTIFICATION NUM	MBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00563171		S THIS X NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M 20 (M3) Jun 20 (M6	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q1		20 (M4) X Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE	Floatio	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Electio	on on	in the State of
5. Covering Period 06	01 2014	through 06	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Lisa Lisker		
Signature of Treasurer Lisa Li.	isker	[Electronically Filed]	Date 07 18 2014
NOTE: Submission of false, erroned	ous, or incomplete information	n may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
	Write or Type Committee Name New York 2014		
_	Report Covering the Period: From:	06 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		0.00
	(b) Cash on Hand at Beginning of Reporting Period	192271.09	
	(c) Total Receipts (from Line 19)	25000.00	435000.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	217271.09	435000.00
7.	Total Disbursements (from Line 31)	154772.09	372501.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62499.00	62499.00
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Ν	lew	٧n	rk	20	114
1	- vv		ı n	/ \	,,4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	05000.00	435000.00
(i) Itemized (use Schedule A)	25000.00	435000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Lines 11(a)(i) and (ii)▶	25000.00	435000.00
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	25000.00	435000.00
Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
All Loans Received	0.00	0.00
7.11 Edulo Ficocivos		
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		0.00
(Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
,		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	25000.00	435000.00
Total Federal Receipts		
iotal i odoral rioodipio	25000.00	435000.00

## **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
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Astinity (from School de III)		Outonadi Todi to Bato
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non Fodeval Chare	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating		0.00
Expenditures	. 200.00	234.77
(c) Total Operating Expenditures	200.00	234.77
(add 21(a)(i), (a)(ii), and (b))	200.00	204.77
Committees	. 0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	. 0.00	0.00
Independent Expenditures	154572.09	372266.23
(use Schedule E) Coordinated Party Expenditures		372200.23
(2 U.S.C. §441a(d)) (use Schedule F)	. 0.00	0.00
Loan Repayments Made	. 0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	. 0.00	0.00
(c) Other Political Committees (such as PACs)	. 0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	. ▶ 0.00	0.00
Other Disbursements	. 0.00	0.00
Federal Election Activity (2 U.S.C. §431(2 (a) Allocated Federal Election Activity	20))	
(from Schedule H6)	0.00	0.00
(i) Federal Share	. 0.00	0.00
(ii) "Levin" Share		0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add . Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22		
23, 24, 25, 26, 27, 28(d), 29 and 30(c)).		372501.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	. ▶ 154772.09	372501.00

### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	25000.00	435000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25000.00	435000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	200.00	234.77
'. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	200.00	234.77

## SCHEDULE A (FEC Form 3X)

	FOF	R LINE	NU	MBER	:	PAGE	6 (	OF	10
Use separate schedule(s)	(che	eck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16		$\prod_{17}$

ITEMIZED RECEIPTS 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 2014 Full Name (Last, First, Middle Initial) Linda E. McMahon Date of Receipt Mailing Address 14 Hurlingham Dr. 06 03 2014 City State Zip Code Transaction ID: SA11AI.4120 CT Greenwich 06831 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Name of Employer Occupation WWE Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation

SUBTOTAL of Receipts This Page (optional)	25000.00	
TOTAL This Period (last page this line number only)	25000.00	

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

SCHEDU	JLE B (FEC Form 3X)	Han annual a to the Co	FOR LINE		PAGE 7 OF 10
ITEMIZE	D DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		24 25 26
		Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b
Any informa	tion copied from such Reports and Stater	nents may not be sold or use	ed by any perso	on for the purpose of	soliciting contributions
or for comm	nercial purposes, other than using the nan				
\	F COMMITTEE (In Full)				
/ New \	York 2014				
_	e (Last, First, Middle Initial)				
A. BB&T	•			Date of Disbursem	
Mailing A	ddress 1909 K St., NW			06 23	2014
City Washingt		State Zip Code DC 20006		Transaction ID:	SB21B.4146
U	of Disbursement	20000			
Bank Fe				Amount of Each D	isbursement this Period
Candidate	e Name		Category/		200.00
Office Sc	ought: House Disburser	ment For:	Туре		
	Senate	Primary General			
01.1	President	Other (specify) ▼			
State:	District: le (Last, First, Middle Initial)				
B.	ie (Lasi, i iisi, iviiuule Illilidi)			Date of Disbursem	ent
				M M / D D	/ Y = Y = Y
Mailing A	address				
City		State Zip Code			
	of Diskussassas				
Purpose	of Disbursement		· · · ·	Amount of Each D	isbursement this Period
Candidate	e Name		Category/		
			Type		
Office So	ought: House Disburser Senate	nent For:  Primary  General			
	President	Other (specify)			
State:	District:	• • • • •			
	e (Last, First, Middle Initial)			D-11- ( D) (	
C.				Date of Disbursem	
Mailing A	address			M M / D D	/
C:4		Otata 7th Onda			
City	,	State Zip Code			
Purpose	of Disbursement				
Candidate	o Namo			Amount of Each D	isbursement this Period
Carididati	e Name		Category/ Type		
Office Sc	ought: House Disburser	ment For:	- 7   -		
	Senate	Primary General			
State:	President	Other (specify) ▼			
State:	District:				
SUBTOTAL	L of Disbursements This Page (optional)				200.00
TOTAL Thi	is Period (last page this line number only)		·····		200.00

Signature

TEMIZED INDEPENDENT EXPENDITURE	:0			DAGE 9 OF 10
IEMIZED INDEPENDENT EXPENDITORE	5			PAGE 8 OF 10 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
New York 2014				C C00563171
Check if 24-hour report 48-hour report	New r	report Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee Digital X-Press			M	
Mailing Address 5 Sand Creek Rd.			0 Amount	6 05 2014
City	State NY	Zip Code 12205	Transact	5966.95
Albany		12205		Disbursement or Obligation
Purpose of Expenditure IE-Stefanik-Direct Mail		Category/ Type 004	0	6 17 2014
Name of Federal Candidate		Support	Office Sought:	X House District: 21
ELISE M. STEFANIK		Oppose	Presiden	t Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		348441.09	Disbursement I 2014 Oth	For:
Full Name of Payee				Public Distribution/Dissemination
Digital X-Press			M	M / D D / Y Y Y Y
Mailing Address 5 Sand Creek Rd.				06 09 2014
5 Saliu Gleek Nu.			Amount	
City	State	Zip Code		5924.29
Albany	NY	12205		tion ID : SE.4135 Disbursement or Obligation
Purpose of Expenditure IE-Stefanik-Direct Mail		Category/ Type 004	M	06 / 17 / 2014
Name of Federal Candidate		Support	Office Sought:	X House District: 21
ELISE M. STEFANIK		Oppose	Presiden	NV
Calendar Year-To-Date			Disbursement	For: Primary General
Per Election for Office Sought		354365.38	2014 Oth	ner (specify)
( ) OUDTOTAL of Headers I bedan and ask Europedia				1120101
(a) SUBTOTAL of Itemized Independent Expendit	ures		· •	11891.24
(b) SUBTOTAL of Unitemized Independent Expen	ditures		· •	7
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authoriz			
Lisa Lisker	[Electi	ronically Filed] Date	07	18 2014

Date

Signature

## 17

	CHEDULE E (FEC Form 3X)		
Tı	EMIZED INDEPENDENT EXPENDITURES		PAGE 9 OF 10 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
١	New York 2014		C C00563171
_ Cł	heck if 24-hour report 48-hour report New report	port Amends repo	ort filed on
	Full Name of Payee Digital X-Press		Date of Public Distribution/Dissemination
	Mailing Address 5 Sand Creek Rd.		06 12 2014 Amount
	State	7:- Oada	5966.95
	City State Albany NY	Zip Code 12205	Transaction ID : SE.4136  Date of Disbursement or Obligation
	Purpose of Expenditure IE-Stefanik-Direct Mail	Category/ Type 004	06 / 17 / 2014
	Name of Federal Candidate	Support	Office Sought:  House District: 21
	ELISE M. STEFANIK	Oppose	President Senate State: NY
	Calendar Year-To-Date Per Election for Office Sought	360332.33	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	Full Name of Payee Digital X-Press		Date of Public Distribution/Dissemination  06 16 2014
	Mailing Address 5 Sand Creek Rd.		Amount 2014
	City State	Zip Code	5966.95
	Albany NY	12205	Transaction ID : SE.4137  Date of Disbursement or Obligation
	Purpose of Expenditure IE-Stefanik-Direct Mail	Category/ Type 004	06 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Office Sought: X House District: 21
	ELISE M. STEFANIK	Oppose	President Senate State: NY
,	Calendar Year-To-Date Per Election for Office Sought	366299.28	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		. 11933.90
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Lisa Lisker		M M / D D / Y Y Y

[Electronically Filed]

07

Date

18

2014

NAME OF COMMITTEE (In Full)

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 10 OF 10 FOR LINE 24 OF FORM 3X	-
FEC IDENTIFICATION NUMBER ▼	٦
C C00563171	
M = M / D = D / Y = Y = Y	
of Public Distribution/Dissemination	
M 06 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
unt	J
5966.95 action ID : SE.4143	ال
of Disbursement or Obligation	
M 06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	١
ht: X House District: 21	
dent Senate State: NY	
nt For: Primary General	
Other (specify) ►	
	4
of Public Distribution/Dissemination	
of Public Distribution/Dissemination  of Of Public Distribution/Dissemination  of Of Public Distribution/Dissemination  of Of Public Distribution/Dissemination	
of Public Distribution/Dissemination  of Public Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Distribution/Dist	
of Public Distribution/Dissemination  M 06 / 03 / Y 2014  Junt	
of Public Distribution/Dissemination  M 06	
e of Public Distribution/Dissemination  M 06	
of Public Distribution/Dissemination  M	
of Public Distribution/Dissemination  M	
of Public Distribution/Dissemination  M	
of Public Distribution/Dissemination  of Public Distribution/Dissemination  of Dispursement of Obligation  of Disbursement or Obligation  of Disbursement or Obligation  of Dispursement o	
of Public Distribution/Dissemination  M	
of Public Distribution/Dissemination  of Public Distribution/Dissemination  of Dispursement of Obligation  of Disbursement or Obligation  of Disbursement or Obligation  of Dispursement o	
of Public Distribution/Dissemination  of Public Distribution/Dissemination  of Dispursement of Obligation  of Disbursement or Obligation  of Disbursement or Obligation  of Dispursement o	
of Public Distribution/Dissemination  of Public Distribution/Dissemination  of Dispursement of Obligation  of Disbursement or Obligation  of Disbursement or Obligation  of Dispursement o	

New York 2014 48-hour report Amends report filed on Check if 24-hour report New report Full Name of Payee Date **Digital X-Press** Mailing Address 5 Sand Creek Rd. Amo City State Zip Code NY Albany 12205 Trans Date Purpose of Expenditure Category/ IE-Stefanik-Direct Mail 004 Type Name of Federal Candidate Office Soug X Support ELISE M. STEFANIK Oppose Presid Disburseme Calendar Year-To-Date 372266.23 2014 Per Election for Office Sought Full Name of Payee Date Target Enterprises Mailing Address 15260 Ventura Blvd. Amo Ste. 1240 City State Zip Code Sherman Oaks CA 91403 Trans Date Purpose of Expenditure Category/ 004 IE-Stefanik-Media Buy Type Name of Federal Candidate X Support Office Sough ELISE M. STEFANIK Oppose Presi Disburseme Calendar Year-To-Date 342474.14 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Lisa Lisker [Electronically Filed] 07 18 2014 Date Signature FEC Schedule E (Form 3X) Rev. 09/2013