



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
GREEN PARTY OF NEW YORK STATE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		4590.06
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	1293.86									
(c) Total Receipts (from Line 19) .....	1656.87	17723.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2950.73	22313.69								
7. Total Disbursements (from Line 31) .....	4799.71	24162.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	-1848.98	-1848.98								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	6739.53									
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 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  
GREEN PARTY OF NEW YORK STATE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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	352.77	8264.06
(i) Itemized (use Schedule A) .....	1304.10	5849.10
(ii) Unitemized .....	1656.87	14113.16
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	2278.40
(b) Political Party Committees .....	0.00	701.41
(c) Other Political Committees (such as PACs) .....	1656.87	17092.97
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	157.55
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	473.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1656.87	17723.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1656.87	17723.63

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	465.29	19374.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	465.29	19374.79
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 Expenditure (use Schedule E) .....	4334.42	4334.42
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	453.46
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4799.71	24162.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4799.71	24162.67

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	1656.87	17092.97
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1656.87	17092.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	465.29	19374.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	157.55
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	465.29	19217.24

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11  
(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

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)  
GREEN PARTY OF NEW YORK STATE

**A.**

Full Name (Last, First, Middle Initial)  
DEYVA ARTHUR

Mailing Address 259 6TH AVE

City State Zip Code  
Troy NY 12182

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

Name of Employer Occupation  
Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.06

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2008

**Transaction ID:** SA11AI.4974

Amount of Each Receipt this Period  
112.77

In-kind - Breakfast items

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Paul T Culley

Mailing Address 60 Pine Hill Drive

City State Zip Code  
Alfred NY 14802

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 882.55

Date of Receipt  
MM / DD / YYYY  
11 / 17 / 2008

**Transaction ID:** SA11AI.4977

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Craig Taylor

Mailing Address 10920 Tinkham Road

City State Zip Code  
Darien Center NY 14040

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

Name of Employer Occupation  
Self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2008

**Transaction ID:** SA11AI.4967

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **332.77**

**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 7 / 11	
	(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"/> 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)  
GREEN PARTY OF NEW YORK STATE

A.

Full Name (Last, First, Middle Initial) Mr. Craig Taylor		Date of Receipt																					
Mailing Address 10920 Tinkham Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	2	/	2	0	0	8														
City State Zip Code Darien Center NY 14040		Transaction ID: SA11AI.4980																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00																					
Name of Employer Self	Occupation																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	20.00
<b>TOTAL</b> This Period (last page this line number only) .....	352.77

**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

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)  
GREEN PARTY OF NEW YORK STATE

<b>A.</b> Full Name (Last, First, Middle Initial) DEYVA ARTHUR <hr/> Mailing Address 259 6TH AVE <hr/> City Troy State NY Zip Code 12182 <hr/> Purpose of Disbursement In-kind - Breakfast items Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4975 Date of Disbursement 11 / 15 / 2008
	Amount of Each Disbursement this Period 112.77
<b>B.</b> Full Name (Last, First, Middle Initial) Shalimar Restaurant <hr/> Mailing Address 35 Central Avenue <hr/> City Albany State NY Zip Code 12210 <hr/> Purpose of Disbursement Lunch expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.5004 Date of Disbursement 11 / 15 / 2008
	Amount of Each Disbursement this Period 256.65

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	369.42
<b>TOTAL</b> This Period (last page this line number only) .....	▶	369.42

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 / 11	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
GREEN PARTY OF NEW YORK STATE

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr James Maceda	Nature of Debt (Purpose): Repayment of amounts taken
Mailing Address 814 D Larchmont Acres	
City State ZIP Code Larchmont NY 10538	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD9.5012</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
6739.53	0.00	6739.53

1) <b>SUBTOTALS</b> This Period This Page (optional).....	6739.53
2) <b>TOTALS</b> This Period (last page this line number only).....	6739.53
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	6739.53

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

NAME OF COMMITTEE (In Full) GREEN PARTY OF NEW YORK STATE	FEC IDENTIFICATION NUMBER <b>C</b> C00318907
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Ms Gloria Mattera

Mailing Address  
437 2nd Street

City State Zip Code  
Brooklyn NY 11215

Purpose of Expenditure  
Reimbursement of VP travel expenses

Category/Type **002**

Name of Federal Candidate supported or Opposed by expenditure:  
CYNTHIA MCKINNEY

Calendar Year-To-Date Per Election for Office Sought **3420.92**

Date  
M M / D D / Y Y Y Y  
**1 1 / 1 5 / 2 0 0 8**

Amount  
**200.00**

Transaction ID: SE.5008

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

Full Name (Last, First, Middle, Initial) of Payee  
Ms Gloria Mattera

Mailing Address  
437 2nd Street

City State Zip Code  
Brooklyn NY 11215

Purpose of Expenditure  
Reimbursement for VP travel

Category/Type **002**

Name of Federal Candidate supported or Opposed by expenditure:  
CYNTHIA MCKINNEY

Calendar Year-To-Date Per Election for Office Sought **4334.42**

Date  
M M / D D / Y Y Y Y  
**1 1 / 1 5 / 2 0 0 8**

Amount  
**913.50**

Transaction ID: SE.5009

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2008

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>1113.50</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

Rachel Treichler  
Signature

Date M M / D D / Y Y Y Y  
**1 2 / 0 1 / 2 0 0 8**

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

NAME OF COMMITTEE (In Full) GREEN PARTY OF NEW YORK STATE		FEC IDENTIFICATION NUMBER <b>C</b> C00318907	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Priority Press		Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 8	
Mailing Address TEC Street 61 B		Amount 3220.92	
City State Zip Code Hicksville NY 11801		Transaction ID: SE.4999	
Purpose of Expenditure Mailing of support for GP pres candidate		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Category/Type 006		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: CYNTHIA MCKINNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		3220.92	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	3220.92
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	4334.42
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.	
Rachel Treichler Signature	Date M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 8