

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Recchia for Congress

ADDRESS (number and street)

172 Gravesend Neck Road

Check if different than previously reported. (ACC)

Brooklyn

NY

11223

2. FEC IDENTIFICATION NUMBER ▼

C C00542266

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

11

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 04 / 01 / 2015

through

M M /

D D /

Y Y Y Y 06 / 30 / 2015

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 Ms. Carol Moore

Signature of Treasurer Ms. Carol Moore

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 07 / 15 / 2015

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Recchia for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	413032.86
(b) Total Contribution Refunds (from Line 20(d))	0.00	6278.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	406754.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8308.04	2463279.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	201.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8308.04	2463078.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11949.25	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Recchia for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	535.55
(ii) Unitemized.....	0.00	841.42
(iii) TOTAL of contributions from individuals ▶	0.00	1376.97
(b) Political Party Committees.....	0.00	9575.89
(c) Other Political Committees (such as PACs).....	0.00	402080.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	413032.86
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	201.56
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	6.77	39758.16
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6.77	452992.58

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8308.04	2463279.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	6278.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6278.00
21. OTHER DISBURSEMENTS	0.00	13500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	8308.04	2483057.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	20250.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6.77
25. SUBTOTAL (add Line 23 and Line 24).....	20257.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8308.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11949.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 10
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Recchia for Congress

A. Full Name (Last, First, Middle Initial)
Northfield Bank

Mailing Address 581 Main St
Ste 810

City Woodbridge State NJ Zip Code 07095-1144

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2430.16

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : VN8CEDYJW37

Amount of Each Receipt this Period
2.74

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

Mailing Address 581 Main St
Ste 810

City Woodbridge State NJ Zip Code 07095-1144

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2432.08

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2015

Transaction ID : VN8CEDYJW45

Amount of Each Receipt this Period
1.92

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

Mailing Address 581 Main St
Ste 810

City Woodbridge State NJ Zip Code 07095-1144

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2434.19

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : VN8CEDYJW53

Amount of Each Receipt this Period
2.11

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

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

6.77

6.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 10	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Recchia for Congress

Full Name (Last, First, Middle Initial) A. A&S Pork Store		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2015
Mailing Address 361 Avenue X		Amount of Each Disbursement this Period 555.00 Transaction ID : VN7D69ZCK99
City Brooklyn	State NY	
Zip Code 11223-5941	Purpose of Disbursement Food & Beverage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Blue State Digital		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2015
Mailing Address 406 7th St NW		Amount of Each Disbursement this Period 1132.19 Transaction ID : VN7D69ZCKA7
City Washington	State DC	
Zip Code 20004-2260	Purpose of Disbursement Technology Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Martin Connor		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2015
Mailing Address 61 Pierrepont St		Amount of Each Disbursement this Period 5964.79 Transaction ID : VN7D69ZCKF5
City Brooklyn	State NY	
Zip Code 11201-2453	Purpose of Disbursement Legal Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7651.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Recchia for Congress

Full Name (Last, First, Middle Initial) A. FirstData Merchant Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 19.95 Transaction ID : VN7D69ZCEF5
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FirstData Merchant Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 94.95 Transaction ID : VN7D69ZCEG3
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FirstData Merchant Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 19.95 Transaction ID : VN7D69ZCKB5
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	134.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Recchia for Congress

Full Name (Last, First, Middle Initial) A. FirstData Merchant Bank		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 19.95 Transaction ID : VN7D69ZCKC1
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FirstData Merchant Bank		Date of Disbursement MM / DD / YYYY 06 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 19.95 Transaction ID : VN7D69ZCKD9
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FirstData Merchant Bank		Date of Disbursement MM / DD / YYYY 06 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 19.95 Transaction ID : VN7D69ZCKE7
City Atlanta State GA Zip Code 30342-4799	Purpose of Disbursement Credit Card Processing Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	59.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Recchia for Congress

Full Name (Last, First, Middle Initial) A. NYC Department of Finance		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 1 Centre St FI 22		Amount of Each Disbursement this Period 125.00
City New York	State NY	
Zip Code 10007-1602	Purpose of Disbursement Volunteer's Parking Violation	Transaction ID : VN7D69ZCEH0
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Receivables Performance Management		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address 20816 44th Ave W		Amount of Each Disbursement this Period 336.36
City Lynnwood	State WA	
Zip Code 98036-7744	Purpose of Disbursement Utilities Payment	Transaction ID : VN7D69ZCZ53
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	461.36
TOTAL This Period (last page this line number only).....	8308.04

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Recchia for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor A&S Pork Store		Nature of Debt (Purpose): Food & Beverage for event.
Mailing Address 361 Avenue X		
City State Zip Code Brooklyn NY 11223-5941		

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : VN5EP9HAV34	
Amount Incurred This Period <input type="text" value="555.00"/>	Payment This Period <input type="text" value="555.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

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 <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	

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