

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
New York State Democratic Committee

ADDRESS (number and street) 461 Park Avenue South, 10th Floor  
 Check if different than previously reported. (ACC)  
New York NY 10016

2. **FEC IDENTIFICATION NUMBER** C00143230  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 08 01 2008 through 08 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David Alpert

Signature of Treasurer Electronically Filed by David Alpert Date 09 19 2008

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
3	1

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		232691.46
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	131151.32									
(c) Total Receipts (from Line 19) .....	279889.80	1250354.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	411041.12	1483045.64								
7. Total Disbursements (from Line 31) .....	256467.86	1328472.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	154573.26	154573.26								
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) .....	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: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	8

D	D
3	1

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	35000.00	115625.00
(i) Itemized (use Schedule A) .....	0.00	3783.00
(ii) Unitemized .....	35000.00	119408.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	15000.00
(c) Other Political Committees (such as PACs) .....	0.00	35000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	35000.00	134408.00
12. Transfers From Affiliated/Other Party Committees .....	131262.49	269474.43
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) .....	2291.00	71514.07
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	851.00	15663.85
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	110485.31	759293.83
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	110485.31	759293.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	279889.80	1250354.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	169404.49	491060.35

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	42941.67	305897.51
(ii) Non-Federal Share.....	113341.46	809268.06
(b) Other Federal Operating Expenditures.....	-5000.00	-20938.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	151283.13	1094227.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	50000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	4684.51	4684.51
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.....	16845.00	77843.22
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.....	78655.22	101717.44
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	78655.22	101717.44
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	256467.86	1328472.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143126.40	519204.32

**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 .....	35000.00	134408.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35000.00	134408.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	37941.67	284959.15
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	2291.00	71514.07
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35650.67	213445.08

**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 6 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<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)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jill Braufman	Date of Receipt MM / DD / YYYY 08 / 18 / 2008
	Mailing Address 4 East 66th Street, 5th Floor	<b>Transaction ID:</b> C2048712
	City State Zip Code New York NY 10065	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Morton & Company	Occupation Antique Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Francis Greenburger	Date of Receipt MM / DD / YYYY 08 / 27 / 2008
	Mailing Address 55 5th Ave Fl 15	<b>Transaction ID:</b> C2068127
	City State Zip Code New York NY 10003-4301	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Time Equities, Inc.	Occupation Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jill Braufman	Date of Receipt MM / DD / YYYY 08 / 18 / 2008
	Mailing Address 4 East 66th Street, 5th Floor	<b>Transaction ID:</b> C2048717
	City State Zip Code New York NY 10065	Amount of Each Receipt this Period -5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Morton & Company	Occupation Antique Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	<b>[MEMO ITEM]</b> * Redesignation of 8/17/08 Cntrb

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>25000.00</b>
<b>TOTAL</b> 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 7 / 113
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) 420 Leasing Associates LLC	Date of Receipt MM / DD / YYYY 08 / 19 / 2008
	Mailing Address 1155 Avenue of the Americas 9th Floor	<b>Transaction ID:</b> C2050435
	City State Zip Code New York NY 10036	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

LLC - Members below if it-  
emized. Permissible funds.

<b>B.</b>	Full Name (Last, First, Middle Initial) Johnathan Durst	Date of Receipt MM / DD / YYYY 08 / 19 / 2008
	Mailing Address 17 Old Shop Rd. P.O. Box 360	<b>Transaction ID:</b> C2050442
	City State Zip Code Cross River NY 10518	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Information Requested Occupation Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00

**[MEMO ITEM]**  
\*

<b>C.</b>	Full Name (Last, First, Middle Initial) DOI Holding LLC	Date of Receipt MM / DD / YYYY 08 / 19 / 2008
	Mailing Address 1155 Avenue of the Americas 9th Floor	<b>Transaction ID:</b> C2050446
	City State Zip Code New York NY 10036	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

LLC - Members below if it-  
emized. Permissible funds.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> 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 / 113  
(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"/>	17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Johnathan Durst		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 17 Old Shop Rd. P.O. Box 360		Transaction ID: C2050447
City Cross River	State NY	Zip Code 10518
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Information Requested	Occupation Information Requested	[MEMO ITEM] *
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**B.**

Full Name (Last, First, Middle Initial) Four Times Sq Management LLC		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 1155 Avenue of the Americas		Transaction ID: C2050449
City New York	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	LLC - Members below if it- emized. Permissible funds.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**C.**

Full Name (Last, First, Middle Initial) Johnathan Durst		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 17 Old Shop Rd. P.O. Box 360		Transaction ID: C2050450
City Cross River	State NY	Zip Code 10518
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Information Requested	Occupation Information Requested	[MEMO ITEM] *
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> 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 9 / 113
	<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"/> 17	

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

**A.**

Full Name (Last, First, Middle Initial) Helena Associates		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 1155 Ave. of the Americas, 9 Floor		<b>Transaction ID:</b> C2050452
City New York	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	LLC - Members below if it- emized. Permissible funds.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**B.**

Full Name (Last, First, Middle Initial) Johnathan Durst		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 17 Old Shop Rd. P.O. Box 360		<b>Transaction ID:</b> C2050454
City Cross River	State NY	Zip Code 10518
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Information Requested	Occupation Information Requested	<b>[MEMO ITEM]</b> *
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**C.**

Full Name (Last, First, Middle Initial) DOLP 114 Properties II LLC		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 1155 Avenue of the Americas		<b>Transaction ID:</b> C2067234
City New York	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2500.00
Name of Employer	Occupation	<b>[MEMO ITEM]</b> * Resignation of 6/24/08 Cntrb
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> 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 10 / 113  
(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)  
DOLP 825 Properties LLC

Mailing Address 1155 Avenue of the Americas  
9th Floor

City State Zip Code  
New York NY 10036

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2008

**Transaction ID:** C2067268

Amount of Each Receipt this Period  
-2500.00

**[MEMO ITEM]**  
\* Redesignation of 6/24/08  
Cntrb

**B.** Full Name (Last, First, Middle Initial)  
DOLP 1133 Properties LLC

Mailing Address 1155 Avenue of the Americas  
9th Floor

City State Zip Code  
New York NY 10036

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2008

**Transaction ID:** C2067278

Amount of Each Receipt this Period  
-2500.00

**[MEMO ITEM]**  
\* Redesignation of 6/24/08  
Cntrb

**C.** Full Name (Last, First, Middle Initial)  
DOLP 1155 Properties LLC

Mailing Address 1155 Avenue of the Americas  
9th Floor

City State Zip Code  
New York NY 10036

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2008

**Transaction ID:** C2067282

Amount of Each Receipt this Period  
-2500.00

**[MEMO ITEM]**  
\* Redesignation of 6/24/08  
Cntrb

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

**TOTAL** This Period (last page this line number only) ..... ► 35000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 113

(check only one)

<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.**

Full Name (Last, First, Middle Initial)  
ASDC - Partnership Program

Mailing Address 430 South Capitol St. SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00402404

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
545.66

Date of Receipt

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

Transaction ID: C2050158

Amount of Each Receipt this Period

138.60

**B.**

Full Name (Last, First, Middle Initial)  
ASDC Dollars for Democrats

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt

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

Transaction ID: C2050168

Amount of Each Receipt this Period

12000.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85028.00

Date of Receipt

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

Transaction ID: C2099926

Amount of Each Receipt this Period

5410.00

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

17548.60

**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 12 / 113  
(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)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85028.00

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2008

**Transaction ID:** C2099633

Amount of Each Receipt this Period  
24003.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85028.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2008

**Transaction ID:** C2099635

Amount of Each Receipt this Period  
30500.00

**C.** Full Name (Last, First, Middle Initial)  
DNC State Party Victory Fund

Mailing Address 430 South Capitol Street, S.E.

City State Zip Code  
Washington DC 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 ▼  
34100.77

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2008

**Transaction ID:** C2050194

Amount of Each Receipt this Period  
19210.89

**SUBTOTAL** of Receipts This Page (optional) ..... ► **73713.89**

**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 13 / 113
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Florida Democratic Party		Date of Receipt
	Mailing Address 214 South Bronough Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Tallahassee	FL	32301
	FEC ID number of contributing federal political committee.		Transaction ID: C2099964
	Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text"/> 40000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 40000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 40000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 131262.49

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 113

(check only one)

<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 checked="" 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.**

Full Name (Last, First, Middle Initial)  
DiNapoli 2010

Mailing Address 96 South Swan Street

City State Zip Code  
Albany NY 12210

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
694.00

Date of Receipt

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

Transaction ID: C2100599

Amount of Each Receipt this Period

347.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
Rafael Escalante

Mailing Address 268 Buttrick Avenue, #J2

City State Zip Code  
Bronx NY 10465

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 ▼  
347.00

Date of Receipt

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

Transaction ID: C2049933

Amount of Each Receipt this Period

347.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Reginald Lafayette

Mailing Address 418 Bedford Ave

City State Zip Code  
Mount Vernon NY 10553-2017

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

Name of Employer Information Requested Occupation State Committee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt

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

Transaction ID: C2050210

Amount of Each Receipt this Period

347.00
--------

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

1041.00
---------

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 113
	(check only one)	
<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 checked="" 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

<b>A.</b>	Full Name (Last, First, Middle Initial) New York County Democratic Committee		Date of Receipt
	Mailing Address 461 Park Avenue South, 10th Floor		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New York	NY	10016
	FEC ID number of contributing federal political committee.		Transaction ID: C2050213
	Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="1250.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="3472.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2291.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 113

(check only one)

<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 checked="" type="checkbox"/> 16

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

**A.**

Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City	State	Zip Code
Farmingville	NY	11738

FEC ID number of contributing federal political committee. C C00375618

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

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

851.00

Date of Receipt

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

Transaction ID: C2050172

Amount of Each Receipt this Period

851.00

Voter File Purchase

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">851.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">851.00</span>

**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)

PAGE 17 / 113

<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

A.

Full Name (Last, First, Middle Initial)  
Voter Activation Network

Mailing Address 54 Regent Street

City State Zip Code  
Cambridge MA 02140

Purpose of Disbursement  
In-kind - Voter File Use

Candidate Name  
Friends of Stephen Harrison

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D133858

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-5000.00

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

-5000.00

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

-5000.00

**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)

PAGE 18 / 113

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

A.

Full Name (Last, First, Middle Initial)  
Voter Activation Network

Mailing Address 54 Regent Street

City State Zip Code  
Cambridge MA 02140

Purpose of Disbursement  
In-kind - Voter File Use

Candidate Name  
Friends of Stephen Harrison

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D133857

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 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) NativeEnergy, Inc.</p> <p>Mailing Address 30 Kimball Avenue, Suite 301</p> <p>City South Burlington State VT Zip Code 05403</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D127894 <b>Date of Disbursement</b> 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1845.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NYSDC Campaign Account</p> <p>Mailing Address 424 Madison Avenue</p> <p>City New York State NY Zip Code 10008</p> <p>Purpose of Disbursement Trxfr of excess cntrb from Jill Braufman</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133952 <b>Date of Disbursement</b> 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NYSDC Campaign Account</p> <p>Mailing Address 424 Madison Avenue</p> <p>City New York State NY Zip Code 10008</p> <p>Purpose of Disbursement Trsfr DOLP 114 Properties II LLC's 6/16/08 cntrb as requested</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133953 <b>Date of Disbursement</b> 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

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

9345.00

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<b>A.</b>	Full Name (Last, First, Middle Initial) NYSDC Campaign Account <hr/> Mailing Address 424 Madison Avenue <hr/> City New York State NY Zip Code 10008 <hr/> Purpose of Disbursement Trsrfr DOLP 1133 Properties LLC's 6/16/08 cntrb as requested Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D133954 Date of Disbursement 08 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) NYSDC Campaign Account <hr/> Mailing Address 424 Madison Avenue <hr/> City New York State NY Zip Code 10008 <hr/> Purpose of Disbursement Trsrfr DOLP 1155 Properties LLC's 6/16/08 cntrb as requested Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D133955 Date of Disbursement 08 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) NYSDC Campaign Account <hr/> Mailing Address 424 Madison Avenue <hr/> City New York State NY Zip Code 10008 <hr/> Purpose of Disbursement Trsrfr DOLP 825 Properties LLC's 6/16/08 cntrb as requested Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D133956 Date of Disbursement 08 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	16845.00

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mariam M Ballout</p> <p>Mailing Address 6 Torrero Dr.</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133905</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 80.64</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mariam M Ballout</p> <p>Mailing Address 6 Torrero Dr.</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing &amp; Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133855</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 77.57</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tyler W Barter</p> <p>Mailing Address 16 Columbia Ave. Apt# B</p> <p>City Ballston Spa State NY Zip Code 12020</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133908</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 41.09</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	199.30
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Samhita Bhat	Transaction ID: D133910 Date of Disbursement 08 / 27 / 2008
	Mailing Address 6 Bent Pine Hollow	Amount of Each Disbursement this Period 24.62
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

B.	Full Name (Last, First, Middle Initial) George E Bova	Transaction ID: D133912 Date of Disbursement 08 / 27 / 2008
	Mailing Address 836 Duell Road	Amount of Each Disbursement this Period 46.15
	City Millbrook State NY Zip Code 12545	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

C.	Full Name (Last, First, Middle Initial) George E Bova	Transaction ID: D133859 Date of Disbursement 08 / 20 / 2008
	Mailing Address 836 Duell Road	Amount of Each Disbursement this Period 38.02
	City Millbrook State NY Zip Code 12545	
	Purpose of Disbursement Canvassing & Travel	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	108.79
<b>TOTAL</b> 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) George E Bova</p> <p>Mailing Address 836 Duell Road</p> <p>City Millbrook State NY Zip Code 12545</p> <p>Purpose of Disbursement Canvassing &amp; Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133821</p> <p>Date of Disbursement 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 62.63</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catherine A Bridges</p> <p>Mailing Address 2358 Rt 9D, Apt C</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133861</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 70.77</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amanda R Callais</p> <p>Mailing Address 231 Capitol Street</p> <p>City Denham Springs State LA Zip Code 70726</p> <p>Purpose of Disbursement Canvassing Reimbursements</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D134025</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 342.95</p>

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

476.35

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Amanda R Callais</p> <p>Mailing Address 231 Capitol Street</p> <p>City Denham Springs State LA Zip Code 70726</p> <p>Purpose of Disbursement Canvassing Reimbursements</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D134027</p> <p>Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 226.46</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amanda R Callais</p> <p>Mailing Address 231 Capitol Street</p> <p>City Denham Springs State LA Zip Code 70726</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133950</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 1042.32</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rick Cardarella</p> <p>Mailing Address 29 N. Hamilton</p> <p>City Poughkeepsie State NY Zip Code 12603</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133914</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 47.69</p>

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

1316.47

**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

A.

Full Name (Last, First, Middle Initial)

Rick Cardarella

Mailing Address 29 N. Hamilton

City Poughkeepsie State NY Zip Code 12603

Purpose of Disbursement  
Canvassing

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: D133863

Date of Disbursement

08 / 20 / 2008

Amount of Each Disbursement this Period

111.02

B.

Full Name (Last, First, Middle Initial)

Central Hudson Gas & Electric Corp.

Mailing Address 284 South Avenue

City Poughkeepsie State NY Zip Code 12601-4839

Purpose of Disbursement  
Deposit for Gas & Electric

Candidate Name  
Kirsten Gillibrand

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: D133816

Date of Disbursement

08 / 06 / 2008

Amount of Each Disbursement this Period

251.25

C.

Full Name (Last, First, Middle Initial)

Jacqueline Cohen

Mailing Address 1010 Hoffman Street

City Elmira State NY Zip Code 14905

Purpose of Disbursement  
Wages

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D127898

Date of Disbursement

08 / 06 / 2008

Amount of Each Disbursement this Period

754.90

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

1117.17

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

A.	Full Name (Last, First, Middle Initial) Jacqueline Cohen	Transaction ID: D133686 Date of Disbursement 08 / 20 / 2008
	Mailing Address 1010 Hoffman Street	Amount of Each Disbursement this Period 754.90
	City Elmira State NY Zip Code 14905	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Frank J Conley	Transaction ID: D133867 Date of Disbursement 08 / 20 / 2008
	Mailing Address 11 Cortland St	Amount of Each Disbursement this Period 99.43
	City Troy State NY Zip Code 12108	
	Purpose of Disbursement Canvassing and Travel	
	Candidate Name Kirsten Gillibrand	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Frank J Conley	Transaction ID: D133916 Date of Disbursement 08 / 27 / 2008
	Mailing Address 11 Cortland St	Amount of Each Disbursement this Period 108.72
	City Troy State NY Zip Code 12108	
	Purpose of Disbursement Canvassing and Travel	
	Candidate Name Kirsten Gillibrand	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	963.05
<b>TOTAL</b> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) John C D'Annibale</p> <hr/> <p>Mailing Address 4 Valdepenas Lane</p> <hr/> <p>City Clifton Park State NY Zip Code 12065</p> <hr/> <p>Purpose of Disbursement Canvassing Reimbursements</p> <hr/> <p>Candidate Name Kirsten Gillibrand</p> <hr/> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D134029</p> <p>Date of Disbursement  <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>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>79.60</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	8	79.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	9		2	0	0	8													
79.60																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) John C D'Annibale</p> <hr/> <p>Mailing Address 4 Valdepenas Lane</p> <hr/> <p>City Clifton Park State NY Zip Code 12065</p> <hr/> <p>Purpose of Disbursement Canvassing</p> <hr/> <p>Candidate Name Kirsten Gillibrand</p> <hr/> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133853</p> <p>Date of Disbursement  <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>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>648.87</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	8	648.87
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	0		2	0	0	8													
648.87																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Leslie B Dorler</p> <hr/> <p>Mailing Address 25 Probst Terrace</p> <hr/> <p>City Hopewell Junction State NY Zip Code 12533</p> <hr/> <p>Purpose of Disbursement Canvassing and Travel</p> <hr/> <p>Candidate Name Kirsten Gillibrand</p> <hr/> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133869</p> <p>Date of Disbursement  <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>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <hr/> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>221.94</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	8	221.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		2	0		2	0	0	8													
221.94																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>950.41</b>
<b>TOTAL</b> 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Leslie B Dorler</p> <p>Mailing Address 25 Probst Terrace</p> <p>City Hopewell Junction State NY Zip Code 12533</p> <p>Purpose of Disbursement Canvassing &amp; Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133827</p> <p>Date of Disbursement 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 235.83</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Leslie B Dorler</p> <p>Mailing Address 25 Probst Terrace</p> <p>City Hopewell Junction State NY Zip Code 12533</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133918</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 188.54</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Peter F Doro</p> <p>Mailing Address 21 Harts Village Rd.</p> <p>City Millbrook State NY Zip Code 12545</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133865</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 24.62</p>

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

448.99

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Heather L Gibson</p> <p>Mailing Address 114 Plum Poppy North</p> <p>City Malta State NY Zip Code 12020</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133920</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 76.74</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth Gray</p> <p>Mailing Address 2 Algonquin Rd</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133922</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 29.23</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Gray</p> <p>Mailing Address 2 Algonquin Rd</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D133871</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 56.92</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>162.89</b>
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Ms. Lisa Hartman	Transaction ID: D133873 Date of Disbursement 08 / 20 / 2008
	Mailing Address 1160 3rd Ave	Amount of Each Disbursement this Period 24.62
	City New York State NY Zip Code 10021-5909	
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Lisa Hartman	Transaction ID: D133924 Date of Disbursement 08 / 27 / 2008
	Mailing Address 1160 3rd Ave	Amount of Each Disbursement this Period 79.11
	City New York State NY Zip Code 10021-5909	
	Purpose of Disbursement Canvassing and Travel	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hydric, Inc.	Transaction ID: D133813 Date of Disbursement 08 / 01 / 2008
	Mailing Address 54 Garden Street	Amount of Each Disbursement this Period 1092.10
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1195.83</b>
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Brian D Kelly	Transaction ID: D133875 Date of Disbursement 08 / 20 / 2008
	Mailing Address 7540 N. Broadway, Apt 1-N	
	City Red Hook State NY Zip Code 12571	Amount of Each Disbursement this Period 24.62
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Maryann P Kelly	Transaction ID: D133877 Date of Disbursement 08 / 20 / 2008
	Mailing Address 7540 N. Broadway, Apt 1-N	
	City Red Hook State NY Zip Code 12571	Amount of Each Disbursement this Period 76.03
	Purpose of Disbursement Canvassing and Travel	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Maryann P Kelly	Transaction ID: D133829 Date of Disbursement 08 / 13 / 2008
	Mailing Address 7540 N. Broadway, Apt 1-N	
	City Red Hook State NY Zip Code 12571	Amount of Each Disbursement this Period 24.62
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	125.27
<b>TOTAL</b> 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

<b>A.</b> Full Name (Last, First, Middle Initial) Maryann P Kelly <hr/> Mailing Address 7540 N. Broadway, Apt 1-N <hr/> City Red Hook State NY Zip Code 12571 <hr/> Purpose of Disbursement Canvassing and Travel <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133926 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 38.02
<b>B.</b> Full Name (Last, First, Middle Initial) Junayd F. Mahmood <hr/> Mailing Address 18 Greenway Terrace <hr/> City Middletown State NY Zip Code 10941 <hr/> Purpose of Disbursement Canvassing & Travel <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133831 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 76.03
<b>C.</b> Full Name (Last, First, Middle Initial) Alice Mann <hr/> Mailing Address 24 Curry Lane <hr/> City Hyde Park State NY Zip Code 12538 <hr/> Purpose of Disbursement Housing <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133851 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 268.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>382.05</b>
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Virginia R Mann	Transaction ID: D133928 Date of Disbursement 08 / 27 / 2008
	Mailing Address 84 Old State Rd, Lot 15	Amount of Each Disbursement this Period 23.07
	City Highland Falls State NY Zip Code 10928	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Corey M McEnroe	Transaction ID: D133833 Date of Disbursement 08 / 13 / 2008
	Mailing Address 3798 Route 44	Amount of Each Disbursement this Period 24.62
	City Millbrook State NY Zip Code 12545	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Kaitlyn A McGauley	Transaction ID: D133836 Date of Disbursement 08 / 13 / 2008
	Mailing Address 108 Buckingham Ct	Amount of Each Disbursement this Period 24.62
	City Pomona State NY Zip Code 10970	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

72.31

**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

A.	Full Name (Last, First, Middle Initial) Kaitlyn A McGauley	Transaction ID: D133930 Date of Disbursement 08 / 27 / 2008
	Mailing Address 108 Buckingham Ct	
	City Pomona State NY Zip Code 10970	Amount of Each Disbursement this Period 70.77
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kaitlyn A McGauley	Transaction ID: D133881 Date of Disbursement 08 / 20 / 2008
	Mailing Address 108 Buckingham Ct	
	City Pomona State NY Zip Code 10970	Amount of Each Disbursement this Period 98.46
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Daniel R McGraw	Transaction ID: D133932 Date of Disbursement 08 / 27 / 2008
	Mailing Address 60 Orchardview Drive	
	City Clifton Park State NY Zip Code 12065	Amount of Each Disbursement this Period 159.75
	Purpose of Disbursement Canvassing and Travel	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>328.98</b>
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Daniel R McGraw	Transaction ID: D133879 Date of Disbursement 08 / 20 / 2008
	Mailing Address 60 Orchardview Drive	Amount of Each Disbursement this Period 62.63
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement Canvassing and Travel	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D133769 Date of Disbursement 08 / 06 / 2008
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 324.36
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D133782 Date of Disbursement 08 / 13 / 2008
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 74.87
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>461.86</b>
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D133789 Date of Disbursement 08 / 20 / 2008
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1331.93
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D133794 Date of Disbursement 08 / 27 / 2008
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 287.50
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

C.	Full Name (Last, First, Middle Initial) Sarah L Pederson	Transaction ID: D133934 Date of Disbursement 08 / 27 / 2008
	Mailing Address 100 Chestnut St., Apt 3	Amount of Each Disbursement this Period 49.23
	City Albany State NY Zip Code 12210	
	Purpose of Disbursement Canvassing	Category/Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

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

1668.66

**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

A.	Full Name (Last, First, Middle Initial) Sarah L Pederson	Transaction ID: D133883 Date of Disbursement 08 / 20 / 2008
	Mailing Address 100 Chestnut St., Apt 3	Amount of Each Disbursement this Period 24.62
	City Albany State NY Zip Code 12210	
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

B.	Full Name (Last, First, Middle Initial) Kristina Persuad	Transaction ID: D133885 Date of Disbursement 08 / 20 / 2008
	Mailing Address 7 Saint Andrews Dr	Amount of Each Disbursement this Period 126.10
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

C.	Full Name (Last, First, Middle Initial) Kristina Persuad	Transaction ID: D133936 Date of Disbursement 08 / 27 / 2008
	Mailing Address 7 Saint Andrews Dr	Amount of Each Disbursement this Period 95.94
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement Canvassing	Category/ Type
	Candidate Name Kirsten Gillibrand	
	Office Sought: <input checked="" 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: NY District: 20	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	246.66
<b>TOTAL</b> 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Emily Provencher</p> <p>Mailing Address 16 Heritage Lane</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133938</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 52.31</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Emily Provencher</p> <p>Mailing Address 16 Heritage Lane</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133887</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 52.31</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Peter Prunty</p> <p>Mailing Address 20 English Way</p> <p>City Pleasant Valley State NY Zip Code 12569</p> <p>Purpose of Disbursement Canvassing</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133889</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 138.44</p>

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

243.06

**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

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter Prunty <hr/> Mailing Address 20 English Way <hr/> City Pleasant Valley State NY Zip Code 12569 <hr/> Purpose of Disbursement Canvassing <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133940 Date of Disbursement 08 / 27 / 2008 <hr/> Amount of Each Disbursement this Period 132.95
<b>B.</b>	Full Name (Last, First, Middle Initial) Peter Prunty <hr/> Mailing Address 20 English Way <hr/> City Pleasant Valley State NY Zip Code 12569 <hr/> Purpose of Disbursement Canvassing <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133838 Date of Disbursement 08 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 24.62
<b>C.</b>	Full Name (Last, First, Middle Initial) Julia M Ryan <hr/> Mailing Address 67 Stringham Rd <hr/> City Poughkeepsie State NY Zip Code 12603 <hr/> Purpose of Disbursement Canvassing <hr/> Candidate Name Kirsten Gillibrand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133942 Date of Disbursement 08 / 27 / 2008 <hr/> Amount of Each Disbursement this Period 21.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	179.10
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) UPS  Mailing Address P.O. Box 7247-0244  City Philadelphia State PA Zip Code 19170-0001  Purpose of Disbursement Shipping Candidate Name Kirsten Gillibrand Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133847 Date of Disbursement 08 / 15 / 2008  Amount of Each Disbursement this Period 15.12
B.	Full Name (Last, First, Middle Initial) Amanda Van Voorhies  Mailing Address 20 E Academy Street  City Wappingers Falls State NY Zip Code 12590  Purpose of Disbursement Canvassing Candidate Name Kirsten Gillibrand Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133842 Date of Disbursement 08 / 13 / 2008  Amount of Each Disbursement this Period 49.23
C.	Full Name (Last, First, Middle Initial) Amanda Van Voorhies  Mailing Address 20 E Academy Street  City Wappingers Falls State NY Zip Code 12590  Purpose of Disbursement Canvassing and Travel Candidate Name Kirsten Gillibrand Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D133944 Date of Disbursement 08 / 27 / 2008  Amount of Each Disbursement this Period 110.09

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

174.44

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Amanda Van Voorhies</p> <p>Mailing Address 20 E Academy Street</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133891</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 148.17</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Justin D Wieczorek</p> <p>Mailing Address 147 Anthony Rd</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133893</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 291.60</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Justin D Wieczorek</p> <p>Mailing Address 147 Anthony Rd</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Canvassing and Travel</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D133946</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 215.83</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	655.60
<b>TOTAL</b> 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

A.

Full Name (Last, First, Middle Initial)  
Michael Wieczorek

Transaction ID: D133948  
Date of Disbursement

Mailing Address 147 Anthony Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	0	8

City State Zip Code  
Clifton Park NY 12065

Amount of Each Disbursement this Period

93.85
-------

Purpose of Disbursement  
Canvassing

Category/  
Type

Candidate Name  
Kirsten Gillibrand

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

B.

Full Name (Last, First, Middle Initial)  
Michael Wieczorek

Transaction ID: D133895  
Date of Disbursement

Mailing Address 147 Anthony Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	0	8

City State Zip Code  
Clifton Park NY 12065

Amount of Each Disbursement this Period

124.61
--------

Purpose of Disbursement  
Canvassing

Category/  
Type

Candidate Name  
Kirsten Gillibrand

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

C.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: D133752  
Date of Disbursement

Mailing Address P.O. Box 2855

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

City State Zip Code  
New York NY 10116-2855

Amount of Each Disbursement this Period

66959.52
----------

Purpose of Disbursement  
Credit Card Payment - see below

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

67177.98
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the 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

**A.**

Full Name (Last, First, Middle Initial)  
Hampton Inn

Mailing Address 137 S Union Boulevard

City Denver State CO Zip Code 80228

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D133758  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
Jetblue Airways

Mailing Address P.O. Box 17435

City Salt Lake City State UT Zip Code 84117-7435

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D133755  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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 44 / 113	
	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 New York	State NY	ZIP Code 10014	

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	24613.55
2) <b>TOTALS</b> This Period (last page this line number only).....	24613.55
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)	24613.55

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Mariam M Ballout		Purpose of Expenditure Canvassing & Travel	<input type="text"/>
Mailing Address 6 Torrero Dr.		Category/Type	
City	State	ZIP Code	Date
Clifton Park	NY	12065	M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 38.20
Transaction ID: D133856		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Mariam M Ballout		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 6 Torrero Dr.		Category/Type	
City	State	ZIP Code	Date
Clifton Park	NY	12065	M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 39.72
Transaction ID: D133907		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Tyler W Barter		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 16 Columbia Ave. Apt# B		Category/Type	
City	State	ZIP Code	Date
Ballston Spa	NY	12020	M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 20.24
Transaction ID: D133909		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>98.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Samhita Bhat		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 6 Bent Pine Hollow			
City	State	ZIP Code	
Clifton Park	NY	12065	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133911		
		Date	<input type="text"/>
		M M / D D / Y Y Y Y	0 8 / 2 7 / 2 0 0 8
		Amount	12.12
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee George E Bova		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 836 Duell Road			
City	State	ZIP Code	
Millbrook	NY	12545	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133913		
		Date	<input type="text"/>
		M M / D D / Y Y Y Y	0 8 / 2 7 / 2 0 0 8
		Amount	22.73
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee George E Bova		Purpose of Expenditure Canvassing & Travel	<input type="text"/> Category/Type
Mailing Address 836 Duell Road			
City	State	ZIP Code	
Millbrook	NY	12545	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133822		
		Date	<input type="text"/>
		M M / D D / Y Y Y Y	0 8 / 1 3 / 2 0 0 8
		Amount	30.85
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	65.70
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee George E Bova		Purpose of Expenditure Canvassing & Travel	<input type="checkbox"/>
Mailing Address 836 Duell Road		Category/Type	
City Millbrook	State NY	ZIP Code 12545	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 18.72
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D133860			

Full Name (Last, First, Middle Initial) of Each Payee Catherine A Bridges		Purpose of Expenditure Canvassing	<input type="checkbox"/>
Mailing Address 2358 Rt 9D, Apt C		Category/Type	
City Wappingers Falls	State NY	ZIP Code 12590	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 34.85
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D133862			

Full Name (Last, First, Middle Initial) of Each Payee Amanda R Callais		Purpose of Expenditure Canvassing	<input type="checkbox"/>
Mailing Address 231 Capitol Street		Category/Type	
City Denham Springs	State LA	ZIP Code 70726	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 513.38
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
Transaction ID: D133951			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>566.95</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Amanda R Callais		Purpose of Expenditure Canvassing Reimbursements	<input type="text"/>
Mailing Address 231 Capitol Street		Category/Type	
City	State	ZIP Code	Date
Denham Springs	LA	70726	M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 168.91
Transaction ID: D134026		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Amanda R Callais		Purpose of Expenditure Canvassing Reimbursements	<input type="text"/>
Mailing Address 231 Capitol Street		Category/Type	
City	State	ZIP Code	Date
Denham Springs	LA	70726	M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 111.54
Transaction ID: D134028		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Rick Cardarella		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 29 N. Hamilton		Category/Type	
City	State	ZIP Code	Date
Poughkeepsie	NY	12603	M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 23.49
Transaction ID: D133915		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>303.94</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Rick Cardarella		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 29 N. Hamilton		Category/Type	
City	State	ZIP Code	Date
Poughkeepsie	NY	12603	M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 54.68
Transaction ID: D133864		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Central Hudson Gas & Electric Corp.		Purpose of Expenditure Deposit for Gas & Electric	<input type="text"/>
Mailing Address 284 South Avenue		Category/Type	
City	State	ZIP Code	Date
Poughkeepsie	NY	12601-4839	M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 123.75
Transaction ID: D133818		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Frank J Conley		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 11 Cortland St		Category/Type	
City	State	ZIP Code	Date
Troy	NY	12108	M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought:	House	State: NY
Kirsten Gillibrand	<input checked="" type="checkbox"/>	Senate	District: 20
		Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		Amount 48.98
Transaction ID: D133868		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	227.41
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Frank J Conley		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 11 Cortland St		Category/Type	
City	State	ZIP Code	Date
Troy	NY	12108	M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 53.55
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133917</b>			

Full Name (Last, First, Middle Initial) of Each Payee John C D'Annibale		Purpose of Expenditure Canvassing Reimbursements	<input type="text"/>
Mailing Address 4 Valdepenas Lane		Category/Type	
City	State	ZIP Code	Date
Clifton Park	NY	12065	M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 39.20
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D134030</b>			

Full Name (Last, First, Middle Initial) of Each Payee John C D'Annibale		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 4 Valdepenas Lane		Category/Type	
City	State	ZIP Code	Date
Clifton Park	NY	12065	M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 319.60
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133854</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="412.35"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Leslie B Dorler		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 25 Probst Terrace		Category/Type	
City Hopewell Junction	State NY	ZIP Code 12533	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 92.86
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133919</b>			

Full Name (Last, First, Middle Initial) of Each Payee Leslie B Dorler		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 25 Probst Terrace		Category/Type	
City Hopewell Junction	State NY	ZIP Code 12533	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 109.31
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133870</b>			

Full Name (Last, First, Middle Initial) of Each Payee Leslie B Dorler		Purpose of Expenditure Canvassing & Travel	<input type="text"/>
Mailing Address 25 Probst Terrace		Category/Type	
City Hopewell Junction	State NY	ZIP Code 12533	Date MM / DD / YYYY 08 / 13 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 116.15
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133828</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="318.32"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Peter F Doro		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 21 Harts Village Rd.			
City Millbrook	State NY	ZIP Code 12545	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date MM / DD / YYYY 08 / 20 / 2008	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Amount <input type="text" value="12.12"/>	
<b>Transaction ID: D133866</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Heather L Gibson		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 114 Plum Poppy North			
City Malta	State NY	ZIP Code 12020	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date MM / DD / YYYY 08 / 27 / 2008	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Amount <input type="text" value="37.80"/>	
<b>Transaction ID: D133921</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Elizabeth Gray		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 2 Algonquin Rd			
City Clifton Park	State NY	ZIP Code 12065	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date MM / DD / YYYY 08 / 27 / 2008	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Amount <input type="text" value="14.39"/>	
<b>Transaction ID: D133923</b>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="64.31"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**

**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Elizabeth Gray		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 2 Algonquin Rd			
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 28.04
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133872</b>			

Full Name (Last, First, Middle Initial) of Each Payee Ms. Lisa Hartman		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 1160 3rd Ave			
City New York	State NY	ZIP Code 10021-5909	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 12.12
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133874</b>			

Full Name (Last, First, Middle Initial) of Each Payee Ms. Lisa Hartman		Purpose of Expenditure Canvassing and Travel	<input type="text"/> Category/Type
Mailing Address 1160 3rd Ave			
City New York	State NY	ZIP Code 10021-5909	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 38.96
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133925</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="79.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State NY
		ZIP Code 10016

Full Name (Last, First, Middle Initial) of Each Payee Hydric, Inc.		Purpose of Expenditure Office Rent	<input type="text"/>
Mailing Address 54 Garden Street		Category/Type	
City Poughkeepsie	State NY	ZIP Code 12601	Date MM / DD / YYYY 08 / 01 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NY</u> District: <u>20</u>	Amount 537.90
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133814</b>			

Full Name (Last, First, Middle Initial) of Each Payee Brian D Kelly		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 7540 N. Broadway, Apt 1-N		Category/Type	
City Red Hook	State NY	ZIP Code 12571	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NY</u> District: <u>20</u>	Amount 12.12
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133876</b>			

Full Name (Last, First, Middle Initial) of Each Payee Maryann P Kelly		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 7540 N. Broadway, Apt 1-N		Category/Type	
City Red Hook	State NY	ZIP Code 12571	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: <u>NY</u> District: <u>20</u>	Amount 18.72
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133927</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="568.74"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Maryann P Kelly		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 7540 N. Broadway, Apt 1-N		Category/Type	
City Red Hook	State NY	ZIP Code 12571	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 37.45
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133878</b>			

Full Name (Last, First, Middle Initial) of Each Payee Maryann P Kelly		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 7540 N. Broadway, Apt 1-N		Category/Type	
City Red Hook	State NY	ZIP Code 12571	Date MM / DD / YYYY 08 / 13 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 12.12
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133830</b>			

Full Name (Last, First, Middle Initial) of Each Payee Junayd F. Mahmood		Purpose of Expenditure Canvassing & Travel	<input type="text"/>
Mailing Address 18 Greenway Terrace		Category/Type	
City Middletown	State NY	ZIP Code 10941	Date MM / DD / YYYY 08 / 13 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 37.45
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133832</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="87.02"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Alice Mann		Purpose of Expenditure Housing	<input type="text"/> Category/Type
Mailing Address 24 Curry Lane			
City	State	ZIP Code	Date
Hyde Park	NY	12538	M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: NY	Amount <input type="text"/> 132.00
Kirsten Gillibrand	<input type="checkbox"/> Senate	District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/> 4684.51		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133852</b>			

Full Name (Last, First, Middle Initial) of Each Payee Virginia R Mann		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 84 Old State Rd, Lot 15			
City	State	ZIP Code	Date
Highland Falls	NY	10928	M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: NY	Amount <input type="text"/> 11.37
Kirsten Gillibrand	<input type="checkbox"/> Senate	District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/> 4684.51		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133929</b>			

Full Name (Last, First, Middle Initial) of Each Payee Corey M McEnroe		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 3798 Route 44			
City	State	ZIP Code	Date
Millbrook	NY	12545	M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 8
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: NY	Amount <input type="text"/> 12.12
Kirsten Gillibrand	<input type="checkbox"/> Senate	District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text"/> 4684.51		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133834</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text"/> 155.49
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**

**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Kaitlyn A McGauley		Purpose of Expenditure Canvassing	<input type="checkbox"/>
Mailing Address 108 Buckingham Ct		Category/Type	
City Pomona	State NY	ZIP Code 10970	Date MM / DD / YYYY 08 / 13 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 12.12
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
		Transaction ID: D133837	

Full Name (Last, First, Middle Initial) of Each Payee Kaitlyn A McGauley		Purpose of Expenditure Canvassing	<input type="checkbox"/>
Mailing Address 108 Buckingham Ct		Category/Type	
City Pomona	State NY	ZIP Code 10970	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 48.50
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
		Transaction ID: D133882	

Full Name (Last, First, Middle Initial) of Each Payee Kaitlyn A McGauley		Purpose of Expenditure Canvassing	<input type="checkbox"/>
Mailing Address 108 Buckingham Ct		Category/Type	
City Pomona	State NY	ZIP Code 10970	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 34.85
Aggregate General Election Expenditure for this Candidate ▶		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
		Transaction ID: D133931	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>95.47</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
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**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Daniel R McGraw		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 60 Orchardview Drive		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 78.69
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133933</b>			

Full Name (Last, First, Middle Initial) of Each Payee Daniel R McGraw		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 60 Orchardview Drive		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 30.85
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133880</b>			

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX		Purpose of Expenditure Payroll Taxes/Wi- thholdings	<input type="text"/>
Mailing Address 1551 S. Washington Ave., P.O. Box 1180		Category/Type	
City Piscataway	State NJ	ZIP Code 08854	Date MM / DD / YYYY 08 / 13 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 36.88
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133783</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="146.42"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX		Purpose of Expenditure Payroll Taxes/Wi- thholdings	<input type="text"/>
Mailing Address 1551 S. Washington Ave., P.O. Box 1180		Category/Type	
City State ZIP Code Piscataway NJ 08854		Date M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 483.42
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133791</b>			

Full Name (Last, First, Middle Initial) of Each Payee PAYCHEX		Purpose of Expenditure Payroll Taxes/Wi- thholdings	<input type="text"/>
Mailing Address 1551 S. Washington Ave., P.O. Box 1180		Category/Type	
City State ZIP Code Piscataway NJ 08854		Date M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 141.60
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133795</b>			

Full Name (Last, First, Middle Initial) of Each Payee Sarah L Pederson		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 100 Chestnut St., Apt 3		Category/Type	
City State ZIP Code Albany NY 12210		Date M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 8	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 12.12
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133884</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="637.14"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Sarah L Pederson		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 100 Chestnut St., Apt 3		Category/Type	
City Albany	State NY	ZIP Code 12210	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 24.25
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133935</b>			

Full Name (Last, First, Middle Initial) of Each Payee Kristina Persuad		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 7 Saint Andrews Dr		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 47.25
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133937</b>			

Full Name (Last, First, Middle Initial) of Each Payee Kristina Persuad		Purpose of Expenditure Canvassing	<input type="text"/>
Mailing Address 7 Saint Andrews Dr		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 62.11
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133886</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="133.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Emily Provencher		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 16 Heritage Lane			
City	State	ZIP Code	
Clifton Park	NY	12065	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133939		
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Emily Provencher		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 16 Heritage Lane			
City	State	ZIP Code	
Clifton Park	NY	12065	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133888		
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Peter Prunty		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 20 English Way			
City	State	ZIP Code	
Pleasant Valley	NY	12569	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House	State: NY
Kirsten Gillibrand		<input type="checkbox"/> Senate	District: 20
		<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate	4684.51		
	Transaction ID: D133890		
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	119.71
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Peter Prunty		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 20 English Way			
City Pleasant Valley	State NY	ZIP Code 12569	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Date MM / DD / YYYY 08 / 27 / 2008	
Transaction ID: D133941		Amount <input type="text" value="65.49"/>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

Full Name (Last, First, Middle Initial) of Each Payee Peter Prunty		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 20 English Way			
City Pleasant Valley	State NY	ZIP Code 12569	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Date MM / DD / YYYY 08 / 13 / 2008	
Transaction ID: D133840		Amount <input type="text" value="12.12"/>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

Full Name (Last, First, Middle Initial) of Each Payee Julia M Ryan		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 67 Stringham Rd			
City Poughkeepsie	State NY	ZIP Code 12603	
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		Date MM / DD / YYYY 08 / 27 / 2008	
Transaction ID: D133943		Amount <input type="text" value="10.61"/>	
<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="88.22"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee UPS		Purpose of Expenditure Shipping	<input type="checkbox"/> Category/Type
Mailing Address P.O. Box 7247-0244		Date MM / DD / YYYY 08 / 15 / 2008	
City State ZIP Code Philadelphia PA 19170-0001	Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶	4684.51		Transaction ID: D133850
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Amanda Van Voorhies		Purpose of Expenditure Canvassing	<input type="checkbox"/> Category/Type
Mailing Address 20 E Academy Street		Date MM / DD / YYYY 08 / 13 / 2008	
City State ZIP Code Wappingers Falls NY 12590	Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶	4684.51		Transaction ID: D133843
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) of Each Payee Amanda Van Voorhies		Purpose of Expenditure Canvassing and Travel	<input type="checkbox"/> Category/Type
Mailing Address 20 E Academy Street		Date MM / DD / YYYY 08 / 20 / 2008	
City State ZIP Code Wappingers Falls NY 12590	Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20
Aggregate General Election Expenditure for this Candidate ▶	4684.51		Transaction ID: D133892
		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>104.67</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Amanda Van Voorhies		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 20 E Academy Street		Category/Type	
City Wappingers Falls	State NY	ZIP Code 12590	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 54.22
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133945</b>			

Full Name (Last, First, Middle Initial) of Each Payee Justin D Wieczorek		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 147 Anthony Rd		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 143.63
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133894</b>			

Full Name (Last, First, Middle Initial) of Each Payee Justin D Wieczorek		Purpose of Expenditure Canvassing and Travel	<input type="text"/>
Mailing Address 147 Anthony Rd		Category/Type	
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 106.31
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="4684.51"/>		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)	
<b>Transaction ID: D133947</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<input type="text" value="304.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) New York State Democratic Committee		<input type="checkbox"/> Check if 24-hour notice
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee New York State Democratic Committee	
If YES, name the designating committee: DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Mailing Address 461 Park Avenue South, 10th Floor	
	City New York	State ZIP Code NY 10016

Full Name (Last, First, Middle Initial) of Each Payee Michael Wieczorek		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 147 Anthony Rd			
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 20 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 61.38
Aggregate General Election Expenditure for this Candidate ▶	4684.51		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
<b>Transaction ID: D133897</b>			

Full Name (Last, First, Middle Initial) of Each Payee Michael Wieczorek		Purpose of Expenditure Canvassing	<input type="text"/> Category/Type
Mailing Address 147 Anthony Rd			
City Clifton Park	State NY	ZIP Code 12065	Date MM / DD / YYYY 08 / 27 / 2008
Name of Federal Candidate Supported Kirsten Gillibrand	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: NY District: 20	Amount 46.22
Aggregate General Election Expenditure for this Candidate ▶	4684.51		<input type="checkbox"/> Limit Raised Due to Opponent's Spending (2 U.S.C 441a(i)/441a-1)
<b>Transaction ID: D133949</b>			

<b>SUBTOTAL</b> of Expenditures This Page (optional) .....	<b>107.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4684.51</b>

## SCHEDULE H2 (FEC Form 3X)

### ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

#### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER <b>Convention 2008</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">1.00%</div>	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">99.00%</div> <b>Transaction ID:</b> R119
ACTIVITY OR EVENT IDENTIFIER <b>Convention 8/26/08 Invesco Field event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">20.00%</div>	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">80.00%</div> <b>Transaction ID:</b> R120
ACTIVITY OR EVENT IDENTIFIER <b>Fundraising Consulting August 08</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">33.00%</div>	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; text-align: center;">67.00%</div> <b>Transaction ID:</b> R118

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 17360.75
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BREAKDOWN OF TRANSFER RECEIVED		17360.75
<b>i) Total Administrative</b> .....		Transaction ID: T964
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 8	22543.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	22543.00	Transaction ID: T965
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 23272.37
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BREAKDOWN OF TRANSFER RECEIVED

i) <b>Total Administrative</b> .....		23048.88	Transaction ID: T966
ii) <b>Generic Voter Drive</b> .....			Transaction ID:
iii) <b>Exempt Activities</b> .....			Transaction ID:
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)			
a) Spring Gala '08	223.49		Transaction ID: T967
b)			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		223.49	
v) <b>Direct Candidate Support</b> (List of Activity or Event Identifier)			
a)			Transaction ID:
b)			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 08 / 19 / 2008	TOTAL AMOUNT TRANSFERRED 47279.05
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BREAKDOWN OF TRANSFER RECEIVED		47279.05
i) Total Administrative .....		Transaction ID: T968
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	
TOTAL This Period (Generic Voter Drive) .....	
TOTAL This Period (Exempt Activities) .....	
TOTAL This Period (Direct Fundraising) .....	
TOTAL This Period (Direct Candidate Support) .....	
TOTAL This Period (Public Communications Referring Only to Party) .....	
TOTAL This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 30.14
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	30.14	Transaction ID: T969
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	110261.82
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	223.49
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	110485.31

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Abram Jewell			Type of Allocated Activity: <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 1244 Bluebird Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Brighton	State CO	Zip Code 80601	Date <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Security Services			Transaction ID: D133727		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.60		554.40		770.00

<b>B. Full Name (Last, First, Middle Initial)</b> Adam J Riff			Type of Allocated Activity: <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 1016 Union St. #2C			Allocated Activity or Event Year-To-Date 1030084.70		
City Brooklyn	State NY	Zip Code 11225	Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D127905		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
389.74		1002.19		1391.93

<b>C. Full Name (Last, First, Middle Initial)</b> Adam J Riff			Type of Allocated Activity: <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 1016 Union St. #2C			Allocated Activity or Event Year-To-Date 1030084.70		
City Brooklyn	State NY	Zip Code 11225	Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D133722		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
517.05		1329.56		1846.61

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1122.39		2886.15		4008.54

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Aetna			Type of Allocated Activity: <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 P.O. Box 7247-0233			Allocated Activity or Event Year-To-Date 1030084.70		
City Philadelphia	State PA	Zip Code 19170-0233	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Health Insurance			Transaction ID: D127941		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
731.78		1881.72		2613.50

<b>B. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <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 P.O. Box 53852			Allocated Activity or Event Year-To-Date 1030084.70		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D127896		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.16		8.12		11.28

<b>C. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <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 P.O. Box 53852			Allocated Activity or Event Year-To-Date 1030084.70		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D127893		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.52		16.76		23.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
741.46		1906.60		2648.06

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <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 P.O. Box 53852			Allocated Activity or Event Year-To-Date 1030084.70		
City Phoenix	State AZ	Zip Code 85072-3852	Date MM / DD / YYYY 08 / 18 / 2008		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D127950		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.50		117.00		162.50

<b>B. Full Name (Last, First, Middle Initial)</b> Ashley Mitchell			Type of Allocated Activity: <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 96 East Slope Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Mahwah	State NJ	Zip Code 07430	Date MM / DD / YYYY 08 / 08 / 2008		
Purpose of Disbursement: Admin Support			Transaction ID: D127910		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		2160.00		3000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Black Box Network Services			Type of Allocated Activity: <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 21398 Network Place			Allocated Activity or Event Year-To-Date 1030084.70		
City Chicago	State IL	Zip Code 60673	Date MM / DD / YYYY 08 / 15 / 2008		
Purpose of Disbursement: Telephone Maintenance			Transaction ID: D127942		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
208.57		536.34		744.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1094.07		2813.34		3907.41

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Brian Shaw			Type of Allocated Activity: <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 900 S. Fulton Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City Fort Lupton	State CO	Zip Code 80621	Date MM / DD / YYYY 08 / 19 / 2008		
Purpose of Disbursement: Security Services			Transaction ID: D133726		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		540.00		750.00

<b>B. Full Name (Last, First, Middle Initial)</b> Capital One Bank			Type of Allocated Activity: <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 424 Madison Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10017	Date MM / DD / YYYY 08 / 01 / 2008		
Purpose of Disbursement: Vendor Refund-Bank Charge			Transaction ID: D133805		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-0.69		-1.79		-2.48

<b>C. Full Name (Last, First, Middle Initial)</b> Capital One Bank			Type of Allocated Activity: <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 424 Madison Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10017	Date MM / DD / YYYY 08 / 01 / 2008		
Purpose of Disbursement: Vendor Refund-Bank Charge			Transaction ID: D127892		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-37.13		-95.47		-132.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.18		442.74		614.92

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

**A.** Full Name (Last, First, Middle Initial)  
Carly Lindauer

Mailing Address  
317 East 85 Street, Apt. 4D

City State Zip Code  
New York NY 10028

Purpose of Disbursement:  
Wages

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 06 / 2008

Transaction ID: D127902

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
603.72		1552.44		2156.16

**B.** Full Name (Last, First, Middle Initial)  
Carly Lindauer

Mailing Address  
317 East 85 Street, Apt. 4D

City State Zip Code  
New York NY 10028

Purpose of Disbursement:  
Wages

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 20 / 2008

Transaction ID: D133719

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
603.72		1552.44		2156.16

**C.** Full Name (Last, First, Middle Initial)  
Cathy Calhoun

Mailing Address  
119 Duerr Rd.

City State Zip Code  
Liverpool NY 13090

Purpose of Disbursement:  
Wages

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 20 / 2008

Transaction ID: D133679

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
576.84		1483.30		2060.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1784.28		4588.18		6372.46

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Cathy Calhoun			Type of Allocated Activity: <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 119 Duerr Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Liverpool	State NY	Zip Code 13090	Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D127897		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
576.84		1483.30		2060.14

<b>B. Full Name (Last, First, Middle Initial)</b> Chris Cardano			Type of Allocated Activity: <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 8390 Sheridan Blvd., #J 204			Allocated Activity or Event Year-To-Date 1030084.70		
City Arvada	State CO	Zip Code 80003	Date <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Security Services			Transaction ID: D133728		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.60		554.40		770.00

<b>C. Full Name (Last, First, Middle Initial)</b> Chung C. Seto			Type of Allocated Activity: <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 57 Mott Street, Suite 13			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10013	Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Logistics Consulting Non-Candidate Specific			Transaction ID: D127912		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1400.00		3600.00		5000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2192.44		5637.70		7830.14

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Consolidated Edison Company of N.Y. Inc.			Type of Allocated Activity: <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 JAF Station                      P.O. Box 1702			Allocated Activity or Event Year-To-Date 1030084.70																		
City	State	Zip Code	Category/ Type																		
New York	NY	10116-1702																			
Purpose of Disbursement: Utilities			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>8</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>8</td></tr></table> / <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>			M	M	0	8	D	D	0	8	Y	Y	Y	Y	2	0	0	8
M	M																				
0	8																				
D	D																				
0	8																				
Y	Y	Y	Y																		
2	0	0	8																		
Activity or Event Identifier: Administrative			Transaction ID: D127919																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
772.63		1986.77		2759.40

<b>B. Full Name (Last, First, Middle Initial)</b> Cynthia A. German			Type of Allocated Activity: <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 27 Broadway Terrace            Apt. 1D			Allocated Activity or Event Year-To-Date 1030084.70																		
City	State	Zip Code	Category/ Type																		
New York	NY	10040-4714																			
Purpose of Disbursement: Wages			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>8</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>6</td></tr></table> / <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>			M	M	0	8	D	D	0	6	Y	Y	Y	Y	2	0	0	8
M	M																				
0	8																				
D	D																				
0	6																				
Y	Y	Y	Y																		
2	0	0	8																		
Activity or Event Identifier: Administrative			Transaction ID: D127900																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
320.83		825.00		1145.83

<b>C. Full Name (Last, First, Middle Initial)</b> Cynthia A. German			Type of Allocated Activity: <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 27 Broadway Terrace            Apt. 1D			Allocated Activity or Event Year-To-Date 1030084.70																		
City	State	Zip Code	Category/ Type																		
New York	NY	10040-4714																			
Purpose of Disbursement: Wages			Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>8</td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>0</td></tr></table> / <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>			M	M	0	8	D	D	2	0	Y	Y	Y	Y	2	0	0	8
M	M																				
0	8																				
D	D																				
2	0																				
Y	Y	Y	Y																		
2	0	0	8																		
Activity or Event Identifier: Administrative			Transaction ID: D133693																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
320.83		825.00		1145.83

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1414.29		3636.77		5051.06

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Darrison Barrett & Associates, LLC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 895 Broadway			Allocated Activity or Event Year-To-Date 15000.00		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
New York	NY	10003	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Finance Consulting			Transaction ID: D133801		
Activity or Event Identifier: Fundraising Consulting August 08					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4950.00		10050.00		15000.00

<b>B. Full Name (Last, First, Middle Initial)</b> Edna Ishayik			Type of Allocated Activity: <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 673 Union Street, Apt. 3L			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Brooklyn	NY	11215	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Wages			Transaction ID: D133696		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
163.89		421.43		585.32

<b>C. Full Name (Last, First, Middle Initial)</b> Edna Ishayik			Type of Allocated Activity: <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 673 Union Street, Apt. 3L			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Brooklyn	NY	11215	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Wages			Transaction ID: D127901		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
717.68		1845.48		2563.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5831.57		12316.91		18148.48

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> GE Capital			Type of Allocated Activity: <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 P.O. Box 642333			Allocated Activity or Event Year-To-Date 1030084.70		
City Pittsburgh	State PA	Zip Code 15264-2333	Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Equipment Lease			Transaction ID: D127917		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.45		101.44		140.89

<b>B. Full Name (Last, First, Middle Initial)</b> GSG Communications, LLC			Type of Allocated Activity: <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 895 Broadway, 5th Floor			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10003	Date <input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Communications Consulting Non-Cand. Spec			Transaction ID: D127920		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4200.00		10800.00		15000.00

<b>C. Full Name (Last, First, Middle Initial)</b> IBF Consulting, Inc.			Type of Allocated Activity: <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 200 East 36th Street, Suite 6D			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10016	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Computer Consulting			Transaction ID: D127943		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
243.60		626.40		870.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4483.05		11527.84		16010.89

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Isaiah Deets			Type of Allocated Activity: <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 626 South 1st Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City Brighton	State CO	Zip Code 80601	Date <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Security Services			Transaction ID: D133730		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.80		151.20		210.00

<b>B. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <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 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Petty Cash			Transaction ID: D133733		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.00		432.00		600.00

<b>C. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <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 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D133717		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
753.34		1937.16		2690.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
980.14		2520.36		3500.50

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <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 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D127904		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
753.34		1937.16		2690.50

<b>B. Full Name (Last, First, Middle Initial)</b> Lauren M. Corcoran-Doolin			Type of Allocated Activity: <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 88 California Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Long Beach	State NY	Zip Code 11561	Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D133690		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
763.83		1964.13		2727.96

<b>C. Full Name (Last, First, Middle Initial)</b> Lauren M. Corcoran-Doolin			Type of Allocated Activity: <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 88 California Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Long Beach	State NY	Zip Code 11561	Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D127899		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
763.83		1964.13		2727.96

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2281.00		5865.42		8146.42

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <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 1030084.70		
City East Brunswick	State NJ	Zip Code 08816-1103	Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D133698		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
364.25		936.66		1300.91

<b>B. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <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 1030084.70		
City East Brunswick	State NJ	Zip Code 08816-1103	Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Wages			Transaction ID: D127903		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
383.73		986.75		1370.48

<b>C. Full Name (Last, First, Middle Initial)</b> LexisNexis			Type of Allocated Activity: <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 P.O. Box 7247-7090			Allocated Activity or Event Year-To-Date 1030084.70		
City Philadelphia	State PA	Zip Code 19170-7090	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Research Subscriptions			Transaction ID: D127947		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.07		311.34		432.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
869.05		2234.75		3103.80

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> New York State Insurance Fund			Type of Allocated Activity: <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 Workers' Compensation, P.O. Box 4788			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Syracuse	NY	13221-4788			
Purpose of Disbursement: Workers' Compensation Insurance			Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127914		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2150.01		5528.58		7678.59

<b>B. Full Name (Last, First, Middle Initial)</b> NGP Software, Inc.			Type of Allocated Activity: <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 1225 Eye Street, NW, Suite 1225			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Washington	DC	20005			
Purpose of Disbursement: Broadcast Emails Non-Candidate Specific			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127948		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.16		15.84		22.00

<b>C. Full Name (Last, First, Middle Initial)</b> NYSDC Housekeeping Account			Type of Allocated Activity: <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 424 Madison Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
New York	NY	10008			
Purpose of Disbursement: Trxfr of nonfed on offset (See Sch. A)			Date <input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127925		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
900.00		0.00		900.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3056.17		5544.42		8600.59

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Onondaga County Democratic Committee			Type of Allocated Activity: <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 248 East Water Street			Allocated Activity or Event Year-To-Date 1030084.70																						
City	State	Zip Code	Date <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>0</td><td>8</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: D127911			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	8	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	8	/	2	0	0	8																
Syracuse	NY	13202																							
Purpose of Disbursement: Office Rent			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.20		388.80		540.00

<b>B. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <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 1030084.70																						
City	State	Zip Code	Date <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>0</td><td>8</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: D133768			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	6	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	6	/	2	0	0	8																
Piscataway	NJ	08854																							
Purpose of Disbursement: Payroll Taxes/Withholdings			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3895.08		10015.92		13911.00

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <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 1030084.70																						
City	State	Zip Code	Date <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>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: D133788			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	0	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	2	0	/	2	0	0	8																
Piscataway	NJ	08854																							
Purpose of Disbursement: Payroll Taxes/Withholdings			Category/ Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3574.43		9191.38		12765.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7620.71		19596.10		27216.81

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <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 1030084.70		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: D127921		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
90.64		233.07		323.71

<b>B. Full Name (Last, First, Middle Initial)</b> PhoneCharge, Inc.			Type of Allocated Activity: <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 200 Main Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Ansonia	State CT	Zip Code 06401-1860	Date <input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Electronic Bill Payment Service			Transaction ID: D127923		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.98		2.52		3.50

<b>C. Full Name (Last, First, Middle Initial)</b> Postmaster			Type of Allocated Activity: <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 115 East 34 Street			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10016	Date <input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Postage			Transaction ID: D127922		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
115.97		298.21		414.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.59		533.80		741.39

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Press Association, Inc.			Type of Allocated Activity: <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 P.O. Box 414243			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Boston	MA	02241-4243			
Purpose of Disbursement: Subscriptions			Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127913		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.76		570.24		792.00

<b>B. Full Name (Last, First, Middle Initial)</b> Press Association, Inc.			Type of Allocated Activity: <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 P.O. Box 414243			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Boston	MA	02241-4243			
Purpose of Disbursement: Subscriptions			Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127949		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
221.76		570.24		792.00

<b>C. Full Name (Last, First, Middle Initial)</b> Rohini Singh			Type of Allocated Activity: <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 3 Ingold Drive			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Dix Hills	NY	11746			
Purpose of Disbursement: Wages			Date <input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D127906		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
270.63		695.89		966.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
714.15		1836.37		2550.52

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Rohini Singh			Type of Allocated Activity: <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 3 Ingold Drive			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/ Type		
Dix Hills	NY	11746			
Purpose of Disbursement: Wages			Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Administrative			Transaction ID: D133724		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.63		654.78		909.41

<b>B. Full Name (Last, First, Middle Initial)</b> Schmutter, Strull, Fleisch Inc.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 80 Maiden Lane, 12th Floor			Allocated Activity or Event Year-To-Date 13888.06		
City	State	Zip Code	Category/ Type		
New York	NY	10038			
Purpose of Disbursement: Fundraising Insurance			Date <input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Convention 2008			Transaction ID: D134023		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.78		473.22		478.00

<b>C. Full Name (Last, First, Middle Initial)</b> Schmutter, Strull, Fleisch Inc.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 80 Maiden Lane, 12th Floor			Allocated Activity or Event Year-To-Date 13888.06		
City	State	Zip Code	Category/ Type		
New York	NY	10038			
Purpose of Disbursement: Fundraising Insurance			Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>		
Activity or Event Identifier: Convention 2008			Transaction ID: D134024		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.35		529.65		535.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.76		1657.65		1922.41

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> T-Mobile			Type of Allocated Activity: <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 P.O. Box 790047			Allocated Activity or Event Year-To-Date 1030084.70		
City Saint Louis	State MO	Zip Code 63179-0047	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Blackberry/Cellphone Service			Transaction ID: D127945		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.70		96.94		134.64

<b>B. Full Name (Last, First, Middle Initial)</b> TransitCenter, Inc.			Type of Allocated Activity: <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 General Post Office, P.O. Box 27457			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10087-7457	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel			Transaction ID: D127944		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.81		338.94		470.75

<b>C. Full Name (Last, First, Middle Initial)</b> TriSource Solutions LLC			Type of Allocated Activity: <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 1030084.70		
City Davenport	State IA	Zip Code 52807	Date <input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D127895		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
444.36		1142.64		1587.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
613.87		1578.52		2192.39

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> UPS			Type of Allocated Activity: <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 P.O. Box 7247-0244			Allocated Activity or Event Year-To-Date 1030084.70																						
City Philadelphia	State PA	Zip Code 19170-0001	Date <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>0</td><td>8</td><td>/</td><td>1</td><td>5</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	0	8	/	1	5	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	1	5	/	2	0	0	8																
Purpose of Disbursement: Shipping			Transaction ID: D127946																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.26		52.10		72.36

<b>B. Full Name (Last, First, Middle Initial)</b> UPS			Type of Allocated Activity: <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 P.O. Box 7247-0244			Allocated Activity or Event Year-To-Date 1030084.70																						
City Philadelphia	State PA	Zip Code 19170-0001	Date <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>0</td><td>8</td><td>/</td><td>0</td><td>8</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	0	8	/	0	8	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	8	/	2	0	0	8																
Purpose of Disbursement: Shipping			Transaction ID: D127918																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.16		92.99		129.15

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <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 P.O. Box 15124			Allocated Activity or Event Year-To-Date 1030084.70																						
City Albany	State NY	Zip Code 12212-5124	Date <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>0</td><td>8</td><td>/</td><td>1</td><td>3</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	0	8	/	1	3	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	1	3	/	2	0	0	8																
Purpose of Disbursement: Telephone			Transaction ID: D127924																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.02		280.32		389.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.44		425.41		590.85

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

**A. Full Name (Last, First, Middle Initial)**  
Ms. Isabelle M. Parker

Mailing Address  
161 Allen Street, Apt. 2A

City	State	Zip Code
New York	NY	10002

Purpose of Disbursement:  
Expense Reimbursements-see below

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date  /  /   
**Transaction ID:** D127915

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.13		18.34		25.47

**B. Full Name (Last, First, Middle Initial)**  
AAA Locksmiths

Mailing Address  
44 W 46th Street

City	State	Zip Code
New York	NY	10036

Purpose of Disbursement:  
Office Keys

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date  /  /   
**Transaction ID:** D127916

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.13		18.34		25.47

**C. Full Name (Last, First, Middle Initial)**  
Carly Lindauer

Mailing Address  
461 Park Avenue South, 10th Floor

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
Expense Reimbursements-see below

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date  /  /   
**Transaction ID:** D127926

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.66		230.57		320.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.79		248.91		345.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Ceridian Benefits Services Inc.			Type of Allocated Activity: <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 3201 34th St. S			Allocated Activity or Event Year-To-Date 1030084.70		
City Saint Petersburg	State FL	Zip Code 33711	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Health Insurance			Transaction ID: D127927		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.66		230.57		320.23

<b>B. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <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 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1030084.70		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Expense Reimbursements-see below			Transaction ID: D127930		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.39		193.87		269.26

<b>C. Full Name (Last, First, Middle Initial)</b> Cafe Guy and Gallard			Type of Allocated Activity: <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 459 Park Avenue South			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10016	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D127935		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.23		5.72		7.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.39		193.87		269.26

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Cafe Metro

Mailing Address  
839 7th Avenue

City State Zip Code  
New York NY 10019-6001

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127931

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.54		11.68		16.22

**B. Full Name (Last, First, Middle Initial)**  
Capitaland Taxi

Mailing Address  
22 Kraft Avenue

City State Zip Code  
Albany NY 12205

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127932

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.00		18.00		25.00

**C. Full Name (Last, First, Middle Initial)**  
CITGO Oil Co.

Mailing Address  
6100 S Yale Avenue

City State Zip Code  
Tulsa OK 74136-1905

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127933

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.38		18.97		26.35

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

**A. Full Name (Last, First, Middle Initial)**  
Getty

Mailing Address  
3775 Main Street

City State Zip Code  
Warrensburg NY 12885

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127934

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.20		28.80		40.00

**B. Full Name (Last, First, Middle Initial)**  
Maiden Lane of Albany, Inc.

Mailing Address  
111 Washington Avenue

City State Zip Code  
Albany NY 12210

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127936

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.64		9.36		13.00

**C. Full Name (Last, First, Middle Initial)**  
McDonald's Corporation

Mailing Address  
2111 McDonald's Drive

City State Zip Code  
Oak Brook IL 60523

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 08 / 15 / 2008

Transaction ID: D127937

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.35		11.19		15.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

**A. Full Name (Last, First, Middle Initial)**  
NYC Taxi & Limousine Commission

Mailing Address  
40 Rector Street

City State Zip Code  
New York NY 10006

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 08 / 15 / 2008

Transaction ID: D127938

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.64		81.36		113.00

**B. Full Name (Last, First, Middle Initial)**  
Saratoga Race Course

Mailing Address  
267 Union Avenue

City State Zip Code  
Saratoga Springs NY 12866

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 08 / 15 / 2008

Transaction ID: D127939

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.80		7.20		10.00

**C. Full Name (Last, First, Middle Initial)**  
Zaro's

Mailing Address  
Eighth Avenue

City State Zip Code  
New York NY 10001

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 08 / 15 / 2008

Transaction ID: D127940

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.62		1.58		2.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <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 P.O. Box 2855			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/Type		
New York	NY	10116-2855			
Purpose of Disbursement: Credit Card Payment - see below					
Activity or Event Identifier: Administrative			Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> D133609		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2305.72		5929.01		8234.73

<b>B. Full Name (Last, First, Middle Initial)</b> 2nd Ave Deli			Type of Allocated Activity: <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 162 East 33rd Street			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/Type		
New York	NY	10016			
Purpose of Disbursement: Meeting/Meals					
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> D133743		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.65		22.24		30.89

<b>C. Full Name (Last, First, Middle Initial)</b> 99 Restaurant			Type of Allocated Activity: <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 107 Wolf Road			Allocated Activity or Event Year-To-Date 1030084.70		
City	State	Zip Code	Category/Type		
Albany	NY	12205-1208			
Purpose of Disbursement: Meetings/Meals					
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/> <b>Transaction ID:</b> D133687		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.64		24.80		34.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2305.72		5929.01		8234.73

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Airline Stationery Co Inc.			<b>Type of Allocated Activity:</b> <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 284 Madison Avenue			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D134031	
New York	NY	10017		
Purpose of Disbursement: Office Supplies			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.96		190.18		264.14

<b>B. Full Name (Last, First, Middle Initial)</b> Amtrak			<b>Type of Allocated Activity:</b> <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 400 N Capitol St NW			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D133659	
Washington	DC	20001		
Purpose of Disbursement: Travel			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.25		288.65		400.90

<b>C. Full Name (Last, First, Middle Initial)</b> Ben Ash Delicatessen			<b>Type of Allocated Activity:</b> <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 845 7th Avenue			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D133654	
New York	NY	10019		
Purpose of Disbursement: Meetings/Meals			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.38		13.85		19.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
BK Sweeneys Steakhouse  
**Mailing Address**  
636 Franklin Ave  
**City State Zip Code**  
Garden City NY 11530  
**Purpose of Disbursement:**  
Meetings/Meals  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1030084.70  
**Date** 08 / 26 / 2008  
**Transaction ID:** D133675

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.92		56.36		78.28

**B. Full Name (Last, First, Middle Initial)**  
Bongiornos Restaurant  
**Mailing Address**  
23 Dove St  
**City State Zip Code**  
Albany NY 12210-1301  
**Purpose of Disbursement:**  
Meetings/Meals  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1030084.70  
**Date** 08 / 26 / 2008  
**Transaction ID:** D133684

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.32		16.26		22.58

**C. Full Name (Last, First, Middle Initial)**  
Boulevard Taxi Leasing  
**Mailing Address**  
32-56 49TH STREET  
**City State Zip Code**  
Long Island City NY 11103  
**Purpose of Disbursement:**  
Travel  
**Activity or Event Identifier:**  
Administrative  
**[MEMO ITEM]**

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1030084.70  
**Date** 08 / 26 / 2008  
**Transaction ID:** D133670

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		7.70		10.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
California Pizza Kitchen

Mailing Address  
440 Park Avenue South

City	State	Zip Code	Category/ Type
New York	NY	10016	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 

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

  
**Transaction ID:** D133672

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.15		33.80		46.95

**B. Full Name (Last, First, Middle Initial)**  
CDTA Facilities Inc

Mailing Address  
110 Watervliet Avenue

City	State	Zip Code	Category/ Type
Albany	NY	12206-2026	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 

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

  
**Transaction ID:** D133676

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		10.80		15.00

**C. Full Name (Last, First, Middle Initial)**  
Central Parking System

Mailing Address  
110 Harrison Place

City	State	Zip Code	Category/ Type
Syracuse	NY	13202	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1030084.70

Date 

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

  
**Transaction ID:** D133621

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.12		38.88		54.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> City Best Management Inc			Type of Allocated Activity: <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 370 West 51st Street   Ground Floor			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10019	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2008		
Purpose of Disbursement: Travel			Transaction ID: D133658		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.89		10.01		13.90

<b>B. Full Name (Last, First, Middle Initial)</b> Constant Contact			Type of Allocated Activity: <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 1601 Trapelo Rd., Suite 246			Allocated Activity or Event Year-To-Date 1030084.70		
City Waltham	State MA	Zip Code 02451	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2008		
Purpose of Disbursement: Email Service			Transaction ID: D133740		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.20		10.80		15.00

<b>C. Full Name (Last, First, Middle Initial)</b> Crowne Plaza Hotel			Type of Allocated Activity: <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 State And Lodge Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Albany	State NY	Zip Code 12207	Date <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 26 / 2008		
Purpose of Disbursement: Travel			Transaction ID: D133732		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.35		522.91		726.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Delta Air Lines, Inc.			<b>Type of Allocated Activity:</b> <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 1030 Delta Boulevard			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D133662	
Atlanta	GA	30320		
Purpose of Disbursement: Travel			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.06		172.44		239.50

<b>B. Full Name (Last, First, Middle Initial)</b> Don Pepi Deli Inc			<b>Type of Allocated Activity:</b> <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 PENN STATION AMTRAK LEVE			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D133704	
New York	NY	10001		
Purpose of Disbursement: Meetings/Meals			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.32		21.41		29.73

<b>C. Full Name (Last, First, Middle Initial)</b> Enterprise Rent-A-Car			<b>Type of Allocated Activity:</b> <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 6805 State Highway 56			Allocated Activity or Event Year-To-Date 1030084.70	
City	State	Zip Code	Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 26 / 2008 <b>Transaction ID:</b> D133652	
Potsdam	NY	13676		
Purpose of Disbursement: Travel			Category/ Type	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
200.15		514.67		714.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Exxon Mobil			Type of Allocated Activity: <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 1181 Western Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City Albany	State NY	Zip Code 12203	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel			Transaction ID: D133729		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="20.72"/>		<input type="text" value="53.28"/>		<input type="text" value="74.00"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Gallagher's Steak House			Type of Allocated Activity: <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 228 W 52ND ST			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10019	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Meetings/Meal			Transaction ID: D133668		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="26.04"/>		<input type="text" value="66.96"/>		<input type="text" value="93.00"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Getty			Type of Allocated Activity: <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 3775 Main Street			Allocated Activity or Event Year-To-Date 1030084.70		
City Warrensburg	State NY	Zip Code 12885	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel			Transaction ID: D133677		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.60"/>		<input type="text" value="32.40"/>		<input type="text" value="45.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

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

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

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Green Apple Management Corp

Mailing Address  
3420 31st ST

City State Zip Code  
Astoria NY 11106

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date  /  /

Transaction ID: D133666

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.28		11.02		15.30

**B. Full Name (Last, First, Middle Initial)**  
Hyatt Regency Tech Center

Mailing Address  
7800 East Tufts Avenue

City State Zip Code  
Denver CO 80237

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date  /  /

Transaction ID: D133763

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.31		702.78		976.09

**C. Full Name (Last, First, Middle Initial)**  
Intermedia.net

Mailing Address  
150 Mathilda Place, Suite 104

City State Zip Code  
Sunnyvale CA 94086

Purpose of Disbursement:  
Website Hosting

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date  /  /

Transaction ID: D133737

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.14		368.09		511.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Jetblue Airways			Type of Allocated Activity: <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 P.O. Box 17435			Allocated Activity or Event Year-To-Date 1030084.70																						
City Salt Lake City	State UT	Zip Code 84117-7435	Date <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>0</td><td>8</td><td>/</td><td>2</td><td>6</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	0	8	/	2	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	6	/	2	0	0	8																
Purpose of Disbursement: Travel			Category/ Type																						
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D133736																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.47		217.20		301.67

<b>B. Full Name (Last, First, Middle Initial)</b> McDonald's			Type of Allocated Activity: <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 EXIT 23 OF I 87 ROUTE 9			Allocated Activity or Event Year-To-Date 1030084.70																						
City Warrensburg	State NY	Zip Code 12885	Date <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>0</td><td>8</td><td>/</td><td>2</td><td>6</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	0	8	/	2	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	6	/	2	0	0	8																
Purpose of Disbursement: Meetings/Meals			Category/ Type																						
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D133731																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.85		4.77		6.62

<b>C. Full Name (Last, First, Middle Initial)</b> North Country Oil			Type of Allocated Activity: <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 120 Market Street			Allocated Activity or Event Year-To-Date 1030084.70																						
City Potsdam	State NY	Zip Code 13676	Date <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>0</td><td>8</td><td>/</td><td>2</td><td>6</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	0	8	/	2	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	6	/	2	0	0	8																
Purpose of Disbursement: Travel			Category/ Type																						
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>			Transaction ID: D133660																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.77		48.26		67.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
NYC Taxi Verifone

Mailing Address  
37-03 21st ST

City State Zip Code  
Long Island City NY 11101

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133665

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.93		22.97		31.90

**B. Full Name (Last, First, Middle Initial)**  
Peaches Cafe

Mailing Address  
Stuyvesant Plaza 1475 Western Ave

City State Zip Code  
Albany NY 12203

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133678

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.17		28.74		39.91

**C. Full Name (Last, First, Middle Initial)**  
Raza Abbas

Mailing Address  
1770 WEST TH STREET APT C9

City State Zip Code  
Brooklyn NY 11223

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133663

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.16		8.14		11.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> Sheraton Hotel and Towers			Type of Allocated Activity: <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 811 Seventh Avenue			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10019	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel			Transaction ID: D133661		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
283.28		728.44		1011.72

<b>B. Full Name (Last, First, Middle Initial)</b> Sunoco			Type of Allocated Activity: <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 23582 RTE. 3342			Allocated Activity or Event Year-To-Date 1030084.70		
City Watertown	State NY	Zip Code 13601	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Travel			Transaction ID: D133647		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.21		15.96		22.17

<b>C. Full Name (Last, First, Middle Initial)</b> Suteishi Japanese Restaurant			Type of Allocated Activity: <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 24 Peck Slip			Allocated Activity or Event Year-To-Date 1030084.70		
City New York	State NY	Zip Code 10038	Date <input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Meetings/Meals			Transaction ID: D133741		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.92		107.80		149.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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

**A. Full Name (Last, First, Middle Initial)**  
Timberline Steaks & Grill

Mailing Address  
DIA - 6671

City State Zip Code  
Denver CO 80304

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133617

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.59		9.22		12.81

**B. Full Name (Last, First, Middle Initial)**  
United Airlines

Mailing Address  
1101 Dekalb Avenue

City State Zip Code  
Sycamore IL 60178

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133739

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
561.40		1443.60		2005.00

**C. Full Name (Last, First, Middle Initial)**  
Utica Taxi Center

Mailing Address  
465 Utica Ave

City State Zip Code  
Brooklyn NY 11203

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Date 08 / 26 / 2008

Transaction ID: D133691

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.60		6.70		9.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**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)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

**A. Full Name (Last, First, Middle Initial)**  
Vezzo

Mailing Address  
178 Lexington Ave

City State Zip Code  
New York NY 10016-7304

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 08 / 26 / 2008

Transaction ID: D133700

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.69		30.07		41.76

**B. Full Name (Last, First, Middle Initial)**  
WOW Restaurants, Inc/The Wheat Fields

Mailing Address  
440 Broadway

City State Zip Code  
Saratoga Springs NY 12866-2212

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 08 / 26 / 2008

Transaction ID: D133711

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.62		45.31		62.93

**C. Full Name (Last, First, Middle Initial)**  
Yugma Inc

Mailing Address  
5700 Smetana Drive, Suite 100

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement:  
Web Conferencing

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1030084.70

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 08 / 26 / 2008

Transaction ID: D133681

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.39		21.56		29.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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

<b>A. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 P.O. Box 2855			Allocated Activity or Event Year-To-Date 24275.80		
City New York	State NY	Zip Code 10116-2855	Date MM / DD / YYYY 08 / 26 / 2008		
Purpose of Disbursement: Credit Card Payment - see below			Transaction ID: D133761		
Activity or Event Identifier: Convention 8/26/08 Invesco Field event					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4855.16		19420.64		24275.80

<b>B. Full Name (Last, First, Middle Initial)</b> Centerplate			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 1801 Bryant Street, Suite 200			Allocated Activity or Event Year-To-Date 24275.80		
City Denver	State CO	Zip Code 80204	Date MM / DD / YYYY 08 / 26 / 2008		
Purpose of Disbursement: Fundraising Catering			Transaction ID: D133762		
Activity or Event Identifier: Convention 8/26/08 Invesco Field event <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4855.16		19420.64		24275.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4855.16		19420.64		24275.80

**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
42941.67		113341.46		156283.13

**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..... <small>(Use Schedule L-A)</small>	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..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
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..... <small>(Add Lines 4e and 5)</small>	0.00	0.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	189.58	189.58
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	189.58	189.58
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	0.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	189.58	189.58

Image# 28933204821

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: **SA12**

Transaction ID: **C2050158**

The transfer entry on Schedule A, Line #12 for the ASDC Partnership Program (an online credit card processing program) is net of fundraising costs for the memo entry reported on the July Monthly Report for contributions received during the months of April, May, and June.

\*\*\*\*\*

Form/Schedule: **SA12**  
Transaction ID: **C2050168**

With respect to the 2008 September Monthly Report, please note the following relative to Schedule A, Line 12: Transfers received from Dollars for Democrats during August, 2008 reflect contributions received by Dollars for Democrats during the 2008 May, June, and July Monthly reporting periods and retained by Dollars for Democrats until transferred. This explains why there are no memo entries for the 2008 September Monthly Report since the Committee discloses memo schedules on a quarterly basis based upon contributions received by Dollars for Democrats.

Form/Schedule: **SA17**  
Transaction ID: **C2050172**

Please be advised that the amount received by the Committee on Line 17 was for access to the Committee's voter file. The amount charged reflects the prevailing market rate for access to such data and was based on a survey of comparable vendors.

Form/Schedule: SA12

Transaction ID: C2050194

With respect to the 2008 September Monthly Report, please note the following relative to Schedule A, Line 12: Transfers received from Democratic National Committee during August, 2008 reflect contributions received by Democratic National Committee during the 2008 May Monthly, June Monthly and July Monthly reporting periods and retained by Democratic National Committee until transferred. This explains why there are no memo entries for the 2008 September Monthly Report since the Committee discloses memo schedules on a quarterly basis based upon contributions received by Democratic National Committee.