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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| NAME OF COMMITTEE IN FULL     Sean Eldridge for Congress                               |   |    | ]  |           |
|--|---|----|--|-----------|
| ADDRESS (number and street) PO Box 4113  |   |    |  |           |
|  |   |    |  |           |
| CITY, STATE, and ZIP CODE  Kingston  | NY 124  | าว |  |           |
| 2. NAME OF CANDIDATE   | 3. OFFICE SOUGHT (State and District)               |    | 4. FEC IDENTIFICATION  | N NIIMBER |
| Sean Eldridge  | House NY 19   |    | C00541227  |           |
| 5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING                                       | YES, IT AMENDS THE NOTICE FILED ON                  |    | /  | /         |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE   | NAME, MAILING ADDRESS AND ZIP CODE Name of Employer |    | Date (month,   | Amount    |
| Sean Eldridge  | Hudson River Ventures, LLC                          |    | day, year)   |           |
| PO Box 660   |   |    | 10/29/2014   | 300000.00 |
|  | Transaction ID: VN8G9D78118                         |    |  |           |
| Shokan NY 12481-0660 Occupati<br>Preside   |   |    |  |           |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE   | Name of Employer                                    |    | Date (month, day, year)  | Amount    |
| Political Action Committee of the International Alliance of Theatrical Stage Employees |   |    | 10/31/2014   | 2500.00   |
| 207 W 25th St  |   |    | 10/31/2014   | 2500.00   |
| FI 4   | Transaction ID : VN8G9D7R247                        |    |  |           |
| New York NY 10001-7119   | Occupation  |    |  |           |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE   | Name of Employer                                    |    | Date (month,<br>day, year)   | Amount    |
|  | Occupation  |    |  |           |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE   | Name of Employer  Occupation                        |    | Date (month,<br>day, year)   | Amount    |
|  |   |    |  |           |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE   | Name of Employer                                    |    | Date (month,<br>day, year)   | Amount    |
|  | Occupation  |    | -  |           |
| SIGNATURE (optional) Michael Oates   | [Electronically Filed]                              |    | For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100 |           |

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

