

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
Michael Grimm for Congress

ADDRESS (number and street) PO Box 61806
 Check if different than previously reported. (ACC) Staten Island NY 10306-7806

2. **FEC IDENTIFICATION NUMBER** C C00470807 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT
NY 11

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 06 / 24 / 2014 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 06 / 04 / 2014

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 Robert F. Carlin
Signature of Treasurer Robert F. Carlin *[Electronically Filed]* Date 06 / 12 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Michael Grimm for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 04 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	47200	1788347.73
(b) Total Contribution Refunds (from Line 20(d))	2750	4865
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	44450	1783482.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	214397.24	1113945.23
(b) Total Offsets to Operating Expenditures (from Line 14)	64.6	15062.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	214332.64	1098883.09
8. Cash on Hand at Close of Reporting Period (from Line 27)	1002254.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	420587.21	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Michael Grimm for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 04 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	32850	837490.52
(ii) Unitemized.....	850	17750.52
(iii) TOTAL of contributions from individuals ▶	33700	855241.04
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	13500	933106.69
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	47200	1788347.73
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	65662.91
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	64.6	15062.14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	117.54	598.19
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	47382.14	1869670.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	214397.24	1113945.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2750	4865
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2750	4865
21. OTHER DISBURSEMENTS	5575	18230
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	222722.24	1137040.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1177595.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47382.14
25. SUBTOTAL (add Line 23 and Line 24).....	1224977.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	222722.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1002254.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
William Armstrong

Mailing Address 24939 Ridge Road

City State Zip Code
Damascus MD 20872-1824

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

Name of Employer Occupation
Mackintosh Inc Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7909

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Alan S. Bernikow

Mailing Address 207 Benedict Avenue

City State Zip Code
Staten Island NY 10314-2371

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

Name of Employer Occupation
K2 Global Consulting Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF8030

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Kyoung A. Bonn

Mailing Address 1403 Farnam Street
Apt. 306

City State Zip Code
Omaha NE 68102-2237

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

Name of Employer Occupation
Ashley Lynn's Hair & Tanning Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7901

Amount of Each Receipt this Period
1000

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Mike Brodie

Mailing Address 3204 Canyon Creek Drive

City Richardson State TX Zip Code 75080-1509

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

Name of Employer Keller Williams Realty Plano Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7904

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Dena C. Capetanakis

Mailing Address 93 86th Street

City Brooklyn State NY Zip Code 11209-4211

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

Name of Employer Hellenic Classics Occupation Admin.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7927

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Chris Christoforou

Mailing Address 90 Hamlet Drive

City Commack State NY Zip Code 11725-4441

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

Name of Employer Metropolitan Wireless Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7929

Amount of Each Receipt this Period
250

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Philip Christopher

Mailing Address 108 Fairway View Drive

City State Zip Code
Commack NY 11725-4454

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

Name of Employer Occupation
American Network Solutions President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7943

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Catherine Cole

Mailing Address 605 S Austin Street

City State Zip Code
Brenham TX 77833-4110

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

Name of Employer Occupation
Heritage TX Country Prop. Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7902

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Andreas D. Comodromos

Mailing Address 59 Paramus Road

City State Zip Code
Paramus NJ 07652-1320

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

Name of Employer Occupation
Comodromos Associates CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7933

Amount of Each Receipt this Period
500

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Lissette Destito

Mailing Address 94 Everett Avenue

City Staten Island State NY Zip Code 10309-3537

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

Name of Employer Ellen Allen Realty Corp Occupation Real Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 03 / 2014

Transaction ID : A-CF7964

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Bruce M. Green

Mailing Address 101 Cranford Avenue

City Staten Island State NY Zip Code 10306-2113

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : A-CF8012

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Stephen Harding

Mailing Address 2000 Cromwell Drive

City Nashville State TN Zip Code 37215-5620

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

Name of Employer Tennessee Assn. of Realtors Occupation Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : A-CF7911

Amount of Each Receipt this Period
1500

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
William C. Heming, Jr.

Mailing Address 47 Edstone Drive

City Staten Island State NY Zip Code 10301-3401

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

Name of Employer Network 1 Financial Occupation Senior VP - Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7934

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Peter Kakoyiannis

Mailing Address 1413 Silo Road

City Yardley State PA Zip Code 19067-4240

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

Name of Employer ELLK Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7924

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Henry Kammandel

Mailing Address 1520 S 83rd Street

City Omaha State NE Zip Code 68124-1304

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

Name of Employer CBSHOME Real Estate CA Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : A-CF7906

Amount of Each Receipt this Period
 500

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Nicholas A. Karacostas

Mailing Address 2910 212th Street

City State Zip Code
Bayside NY 11360-2531

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

Name of Employer Occupation
Arch Insurance Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7922

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Betty Kincaid

Mailing Address 9662 Azure Drive

City State Zip Code
Las Vegas NV 89149-1303

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

Name of Employer Occupation
Keller Williams Realty Las V Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7903

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
John Kmiecik

Mailing Address 12800 S Pebble Drive

City State Zip Code
Palos Park IL 60464-1637

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

Name of Employer Occupation
Century 21 Affil. Kmiecik Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7905

Amount of Each Receipt this Period
500

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Savas Konstantinides

Mailing Address 10 Merrivale Road

City State Zip Code
Great Neck NY 11021-4915

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

Name of Employer Occupation
Omega Brokerage Inc Insurance Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7936

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jules Kroll

Mailing Address 845 3rd Avenue

City State Zip Code
New York NY 10022-6601

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

Name of Employer Occupation
Kroll Bond Ratings Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : A-CF8028

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Harold Landa

Mailing Address 7518 Chester Terrace

City State Zip Code
Boca Raton FL 33433-4154

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

Name of Employer Occupation
Harold Landa, MD Physician/Pulmonologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 29 / 2014

Transaction ID : A-CF8025

Amount of Each Receipt this Period
250

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Lisa J. Lonuzzi

Mailing Address 41 Barton Avenue

City Staten Island State NY Zip Code 10306-2503

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

Name of Employer Corcoran Occupation Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7926

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Mike Manatos

Mailing Address 8532 W Howell Road

City Bethesda State MD Zip Code 20817-6827

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

Name of Employer Manatos & Manatos Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : A-CF7962

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Evan Marks

Mailing Address 401 E 80th Street Apt. 33F

City New York State NY Zip Code 10075-0647

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

Name of Employer Quad Capital Occupation Trader

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : A-CF7963

Amount of Each Receipt this Period
500

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Edward Mermelstein

Mailing Address 48 W 68th Street

City State Zip Code
New York NY 10023-6051

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

Name of Employer Occupation
Mermelstein Dev. Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : A-CF8022

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Nikos Mouyiaris

Mailing Address 3202 Queens Boulevard

City State Zip Code
Long Island City NY 11101-2319

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

Name of Employer Occupation
Mana Products President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7938

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
James Nadler

Mailing Address 419 E 57th Street
Apt. 2D

City State Zip Code
New York NY 10022-3176

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

Name of Employer Occupation
COO Kroll Bond Rating

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : A-CF8029

Amount of Each Receipt this Period
1000

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Chris Nicolaou

Mailing Address 4760 197th Street

City State Zip Code
Flushing NY 11358-3937

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

Name of Employer Occupation
ICAP Shipping Controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7931

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Nicolas Nicolaou

Mailing Address 11 Bolton Place

City State Zip Code
Fair Lawn NJ 07410-3621

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

Name of Employer Occupation
Unilever Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7928

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Xenokostas Panagiotis

Mailing Address 41 Stone Hill Drive S

City State Zip Code
Manhasset NY 11030-4427

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

Name of Employer Occupation
ONEX Technologies, Inc. President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7923

Amount of Each Receipt this Period
250

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Peter Pantelidis

Mailing Address 14 W 23rd Street

City New York State NY Zip Code 10010-5203

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

Name of Employer PanBrother Assoc. Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7941

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
James A. Pappas

Mailing Address 1600 Old Cedar Swamp Road

City Glen Head State NY Zip Code 11545-2631

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

Name of Employer PJ Mechanical Corp. Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7940

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Peter J. Pappas Jr.

Mailing Address 39 Chestnut Hill Drive

City Oyster Bay State NY Zip Code 11771-2508

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

Name of Employer PJ Mechanical Corp. Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7937

Amount of Each Receipt this Period
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Peter J. Pappas, Sr.

Mailing Address 700 Park Avenue

City State Zip Code
New York NY 10021-7098

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

Name of Employer Occupation
PJ Mechanical Corp. Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7939

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Dianne Rath

Mailing Address 15732 Camino Codorniz

City State Zip Code
San Diego CA 92127-5823

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

Name of Employer Occupation
ERA Eagle Estates Inc Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7912

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Arthur J. Semetis

Mailing Address 35 N Brook Lane

City State Zip Code
Irvington NY 10533-2418

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

Name of Employer Occupation
Arthus J. Semetis, PC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7930

Amount of Each Receipt this Period
250

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Angela Sicoli

Mailing Address 20 Glenroy Road

City State Zip Code
Fairfield NJ 07004-1516

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

Name of Employer Occupation
Century 21 Award Agency Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		25		2014

Transaction ID : A-CF7910

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Larry A. Silverstein

Mailing Address 250 Greenwich Street
Floor 38

City State Zip Code
New York NY 10007-2140

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

Name of Employer Occupation
Silverstein Properties Chairman & President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		02		2014

Transaction ID : A-CF7942

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Janice Smarto

Mailing Address 605 Pennsylvania Boulevard

City State Zip Code
Jeannette PA 15644-2820

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

Name of Employer Occupation
Prudential Preferred Realty Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		25		2014

Transaction ID : A-CF7907

Amount of Each Receipt this Period
500

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Ian K. Snow		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 302 Centre Island Road		Transaction ID : A-CF8027
City Oyster Bay	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Snow Phipps Group LLC	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) B. Damon D. Testaverde		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 580 Oakdale Street		Transaction ID : A-CF7935
City Staten Island	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Network 1 Financial	Occupation Managing Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) C. Kimon C. Thermos		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 5326 211th Street		Transaction ID : A-CF7925
City Bayside Hills	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Basil Vassos

Mailing Address 32 North Drive

City State Zip Code
Whitestone NY 11357-1067

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2014

Transaction ID : A-CF7932

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Frank Vitello

Mailing Address 309 Yoakum Parkway
Apt. 1418

City State Zip Code
Alexandria VA 22304-3903

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

Name of Employer Occupation
Vitello Consulting Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
04 / 08 / 2014

Transaction ID : A-CF7959

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Frank Vitello

Mailing Address 309 Yoakum Parkway
Apt. 1418

City State Zip Code
Alexandria VA 22304-3903

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

Name of Employer Occupation
Vitello Consulting Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
04 / 08 / 2014

Transaction ID : A-CF7960

Amount of Each Receipt this Period
2400

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
Doyle Webb

Mailing Address 3232 Tazewell Pike

City Knoxville State TN Zip Code 37918-2529

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

Name of Employer Realty Executives Assoc. Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7913

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
George Wonica

Mailing Address 38 Margaretta Court

City Staten Island State NY Zip Code 10314-2939

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

Name of Employer Wonica Realtors & Appraisers Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : A-CF8001

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Therese Wunderlich

Mailing Address 1172 3rd Avenue

City Napa State CA Zip Code 94558-3933

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

Name of Employer Terra Firma Global Partners Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7908

Amount of Each Receipt this Period
500

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

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

2000.00

32850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1111 14th Street NW
Suite 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : A-CF8015

Amount of Each Receipt this Period
1000

B. AON Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 200 E Randolph Street

City Chicago State IL Zip Code 60601-6436

FEC ID number of contributing federal political committee. **C C00211250**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : A-CF7893

Amount of Each Receipt this Period
1000

C. BILIRAKIS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

FEC ID number of contributing federal political committee. **C C00408534**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7944

Amount of Each Receipt this Period
2000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 73		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
CNA Financial Corporation Citizens For Good Government

Mailing Address 333 S Wabash Avenue
43-S

City Chicago State IL Zip Code 60604-4107

FEC ID number of contributing federal political committee. **C** C00078287

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : A-CF7894

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL SECURITIES EXCHANGE PAC

Mailing Address 60 Broad Street
Floor 26

City New York State NY Zip Code 10004-2349

FEC ID number of contributing federal political committee. **C** C00382226

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7898

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 905 16th Street NW
Floor 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF8014

Amount of Each Receipt this Period
500

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 905 16th Street NW
Floor 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF8016

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Loews Corporation Public Affairs Committee

Mailing Address 667 Madison Avenue
Att Corporate

City New York State NY Zip Code 10065-8029

FEC ID number of contributing federal political committee. **C C00416495**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : A-CF7899

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Midnight Sun Political Action Committee

Mailing Address PO Box 27814

City Washington State DC Zip Code 20038-7814

FEC ID number of contributing federal political committee. **C C00345199**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : A-CF8013

Amount of Each Receipt this Period
1000

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
NYS Council of Physiotherapists PAC

Mailing Address 142 Joralemon Street

City State Zip Code
Brooklyn NY 11201-4709

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A-CF7945

Amount of Each Receipt this Period
500

NON FEDERAL CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Royal Ten Cate USA, Inc. PAC AKA Tencate PAC

Mailing Address 101 CONSTI AVE NW STE #9C08 EAST

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00523605

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : A-CF7900

Amount of Each Receipt this Period
1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

13500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
ADP

Mailing Address 8094 Sandpiper Circle

City Nottingham State MD Zip Code 21236-4907

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
542.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : A-OF7951

Amount of Each Receipt this Period
64.6

Paryoll Fees REFUND

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

64.60

64.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial)
New York Community Bank

Mailing Address 3879 Amboy Road

City Staten Island State NY Zip Code 10308-2418

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
532.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : A-MF7946

Amount of Each Receipt this Period
57.79

Interest Income

B. Full Name (Last, First, Middle Initial)
New York Community Bank

Mailing Address 3879 Amboy Road

City Staten Island State NY Zip Code 10308-2418

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
532.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : A-MF8021

Amount of Each Receipt this Period
59.75

Interest Income

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

117.54

117.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 7910.5
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Administrative/Salary/Overhead: Payroll	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blaire Bartlett		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address 1603 Rosedale Street NE		Amount of Each Disbursement this Period 410.5
City Washington	State DC	
Zip Code 20002-4525	Purpose of Disbursement Payroll	[MEMO ITEM] Subitemization of ADP(04/03/14)
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. William R Cortese		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address 39 Kossuth Street Floor 2		Amount of Each Disbursement this Period 5500
City Newark	State NJ	
Zip Code 07105-3313	Purpose of Disbursement Payroll	[MEMO ITEM] Subitemization of ADP(04/03/14)
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7910.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Michael Ragonese		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 105 Clarks Lane		Amount of Each Disbursement this Period 2000 Transaction ID : B-S-2135
City Milton State NY Zip Code 12547-5260	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of ADP(04/03/14)
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 146.9 Transaction ID : B-E-7881
City Nottingham State MD Zip Code 21236-4907	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 96.6 Transaction ID : B-E-7947
City Nottingham State MD Zip Code 21236-4907	Purpose of Disbursement Payroll Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	243.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 900 Transaction ID : B-E-7948
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Administrative/Salary/Overhead: Payroll	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Jack Alvarez		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1 Center Place		Amount of Each Disbursement this Period 900 Transaction ID : B-S-2145
City Staten Island	State NY	
Zip Code 10306-5711	Purpose of Disbursement Payroll	[MEMO ITEM] Subitemization of ADP(04/15/14)
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement MM / DD / YYYY 04 / 18 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 92.4 Transaction ID : B-E-7949
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Payroll Fees	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	992.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 25
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Payroll Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 9110.5
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Administrative/Salary/Overhead: Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) c. Blaire Bartlett		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1603 Rosedale Street NE		Amount of Each Disbursement this Period 410.5
City Washington	State DC	
Zip Code 20002-4525	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		[MEMO ITEM] Subitemization of ADP(05/01/14)

SUBTOTAL of Disbursements This Page (optional)..... 9135.50
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. William R Cortese		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 39 Kossuth Street Floor 2		Amount of Each Disbursement this Period 5500
City Newark	State NJ Zip Code 07105-3313	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : B-S-2143
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of ADP(05/01/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Jack Alvarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1 Center Place		Amount of Each Disbursement this Period 1200
City Staten Island	State NY Zip Code 10306-5711	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : B-S-2141
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of ADP(05/01/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Michael Ragonese		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 105 Clarks Lane		Amount of Each Disbursement this Period 2000
City Milton	State NY Zip Code 12547-5260	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : B-S-2144
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of ADP(05/01/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 73		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 146.9
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Payroll Taxes	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ADP		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 8094 Sandpiper Circle		Amount of Each Disbursement this Period 96.6
City Nottingham	State MD	
Zip Code 21236-4907	Purpose of Disbursement Payroll Fees	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 5245.66
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Credit Card Charges	001
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	5489.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 02 / 23 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 205.59
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Finance Charge	Transaction ID : B-S-2108
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Taylor Gourmet		Date of Disbursement MM / DD / YYYY 01 / 29 / 2014
Mailing Address 485 K Street NW		Amount of Each Disbursement this Period 97.9
City Washington	State DC	
Zip Code 20001-2530	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2111
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) c. PNG Computers, Inc.		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 706 New Dorp Lane		Amount of Each Disbursement this Period 326.63
City Staten Island	State NY	
Zip Code 10306-4932	Purpose of Disbursement Office Supplies	Transaction ID : B-S-2123
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Hilton Garden Inn		Date of Disbursement MM / DD / YYYY 02 / 09 / 2014
Mailing Address 1100 South Avenue		Amount of Each Disbursement this Period 200
City Staten Island	State NY	Zip Code 10314-3410
Purpose of Disbursement Event Deposit	Category/Type 003	
Candidate Name	Transaction ID : B-S-2121	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Harris Media LLC		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 611 S Congress Avenue Suite 400		Amount of Each Disbursement this Period 3851.99
City Austin	State TX	Zip Code 78704-1714
Purpose of Disbursement Online Fundraising	Category/Type 003	
Candidate Name	Transaction ID : B-S-2112	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) c. ExxonMobil		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 231 Bay Street		Amount of Each Disbursement this Period 88.11
City Staten Island	State NY	Zip Code 10301-3243
Purpose of Disbursement Transportation	Category/Type 002	
Candidate Name	Transaction ID : B-S-2109	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Colonial Parking		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 4301 Fairfax Drive		Amount of Each Disbursement this Period 25
City Arlington	State VA	Zip Code 22203-1627
Purpose of Disbursement Transportation	Category/ Type 002	
Candidate Name	Transaction ID : B-S-2114	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 4173.63
City Dallas	State TX	Zip Code 75265-0448
Purpose of Disbursement Credit Card Charges	Category/ Type 001	
Candidate Name	Transaction ID : B-E-7854	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement MM / DD / YYYY 03 / 26 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 313.13
City Dallas	State TX	Zip Code 75265-0448
Purpose of Disbursement Finance Charge	Category/ Type 001	
Candidate Name	Transaction ID : B-S-2126	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4173.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Richmond Operating LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 2990 Victory Boulevard		Amount of Each Disbursement this Period 75
City Staten Island	State NY Zip Code 10314-6605	
Purpose of Disbursement Transportation	Category/Type 002	Transaction ID : B-S-2127 [MEMO ITEM] Subitemization of American Express(04/04/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 91
City Staten Island	State NY Zip Code 10306-3144	
Purpose of Disbursement Transportation	Category/Type 002	Transaction ID : B-S-2128 [MEMO ITEM] Subitemization of American Express(04/04/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon Center		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 601 F Street NW		Amount of Each Disbursement this Period 1494.45
City Washington	State DC Zip Code 20004-1605	
Purpose of Disbursement Food & Beverage	Category/Type 003	Transaction ID : B-S-2129 [MEMO ITEM] Subitemization of American Express(04/04/14)
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Acqua AI 2		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 1852.05
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2131
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 4000 E Sky Harbor Boulevard		Amount of Each Disbursement this Period 348
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Airfare	Transaction ID : B-S-2130
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(04/04/14)
State: District:		

Full Name (Last, First, Middle Initial) c. American Express		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 8061.39
City Dallas	State TX	
Zip Code 75265-0448	Purpose of Disbursement Credit Card Charges	Transaction ID : B-E-7980
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8061.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 650448		Amount of Each Disbursement this Period 207.46
City Dallas	State TX	Zip Code 75265-0448
Purpose of Disbursement Finance Charge	Category/ Type 001	
Candidate Name	Transaction ID : B-S-2178	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 67.3
City Staten Island	State NY	Zip Code 10306-3144
Purpose of Disbursement Transportation	Category/ Type 002	
Candidate Name	Transaction ID : B-S-2164	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Hess		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 200
City Staten Island	State NY	Zip Code 10306-3144
Purpose of Disbursement Transportation	Category/ Type 002	
Candidate Name	Transaction ID : B-S-2166	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement MM / DD / YYYY 03 / 16 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 61
City Staten Island	State NY	
Zip Code 10306-3144	Purpose of Disbursement Transportation	Transaction ID : B-S-2172
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Hess		Date of Disbursement MM / DD / YYYY 03 / 19 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 35
City Staten Island	State NY	
Zip Code 10306-3144	Purpose of Disbursement Transportation	Transaction ID : B-S-2173
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Hess		Date of Disbursement MM / DD / YYYY 03 / 22 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 160
City Staten Island	State NY	
Zip Code 10306-3144	Purpose of Disbursement Transportation	Transaction ID : B-S-2175
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Hess		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2488 Hylan Boulevard		Amount of Each Disbursement this Period 89.45
City Staten Island	State NY	
Zip Code 10306-3144	Purpose of Disbursement Transportation	Transaction ID : B-S-2182
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Richmond Operating LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 2990 Victory Boulevard		Amount of Each Disbursement this Period 75
City Staten Island	State NY	
Zip Code 10314-6605	Purpose of Disbursement Transportation	Transaction ID : B-S-2180
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Harry Caray's Restaurant		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 33 W Kinzie Street		Amount of Each Disbursement this Period 450
City Chicago	State IL	
Zip Code 60654-4613	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2152
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. EZ Pass VA		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 1234		Amount of Each Disbursement this Period 000,000.00 Transaction ID : B-S-2154
City Clifton Forge	State VA	
Zip Code 24422-0724	Purpose of Disbursement Transportation	[MEMO ITEM] Subitemization of American Express(05/12/14)
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 000,332.06 Transaction ID : B-S-2159
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	[MEMO ITEM] Subitemization of American Express(05/12/14)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 000,162.60 Transaction ID : B-S-2160
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	[MEMO ITEM] Subitemization of American Express(05/12/14)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 186.4
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	Transaction ID : B-S-2165
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 16.27
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	Transaction ID : B-S-2171
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 174.18
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	Transaction ID : B-S-2167
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 1885 Hylan Boulevard		Amount of Each Disbursement this Period 41.62
City Staten Island	State NY	
Zip Code 10305-2110	Purpose of Disbursement Office Supplies	Transaction ID : B-S-2169
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Acqua AI 2		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 145.86
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2155
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) c. Acqua AI 2		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 460.69
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2148
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Morton's Steakhouse		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 1050 Connecticut Avenue NW		Amount of Each Disbursement this Period 1697.99
City Washington State DC Zip Code 20036-5303	Purpose of Disbursement Food & Beverage 003 Category/Type	
Candidate Name		Transaction ID : B-S-2151 [MEMO ITEM] Subitemization of American Express(05/12/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hilton Garden Inn		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2014
Mailing Address 1100 South Avenue		Amount of Each Disbursement this Period 2560
City Staten Island State NY Zip Code 10314-3410	Purpose of Disbursement Food & Beverage 003 Category/Type	
Candidate Name		Transaction ID : B-S-2161 [MEMO ITEM] Subitemization of American Express(05/12/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Colonial Parking		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 4301 Fairfax Drive		Amount of Each Disbursement this Period 18
City Arlington State VA Zip Code 22203-1627	Purpose of Disbursement Transportation 002 Category/Type	
Candidate Name		Transaction ID : B-S-2150 [MEMO ITEM] Subitemization of American Express(05/12/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. ExxonMobil		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address 231 Bay Street		Amount of Each Disbursement this Period 57.01
City Staten Island	State NY	
Zip Code 10301-3243	Purpose of Disbursement Transportation	Transaction ID : B-S-2177
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. ExxonMobil		Date of Disbursement MM / DD / YYYY 04 / 05 / 2014
Mailing Address 231 Bay Street		Amount of Each Disbursement this Period 96.3
City Staten Island	State NY	
Zip Code 10301-3243	Purpose of Disbursement Transportation	Transaction ID : B-S-2181
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 54.44
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Cell Phone	Transaction ID : B-S-2158
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 2562 Hylan Boulevard		Amount of Each Disbursement this Period 19.99
City Staten Island	State NY	
Zip Code 10306-8689	Purpose of Disbursement Postage	Transaction ID : B-S-2163
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of American Express(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 2100
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Compliance Software	Transaction ID : B-E-7981
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Barry Zeplowitz & Associates		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 300 Pearl Street Suite 600		Amount of Each Disbursement this Period 400
City Buffalo	State NY	
Zip Code 14202-2501	Purpose of Disbursement Polling: Voter Surveys	Transaction ID : B-E-7897
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Barry Zeplowitz & Associates		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 300 Pearl Street Suite 600		Amount of Each Disbursement this Period 6000 Transaction ID : B-E-8017
City Buffalo State NY Zip Code 14202-2501	Purpose of Disbursement Polling: Polling Candidate Name Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. BB&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period 260.39 Transaction ID : B-E-7855
City Washington State DC Zip Code 20006-1152	Purpose of Disbursement Credit Card Charge Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 260.39 Transaction ID : B-S-2132
City Lehigh Valley State PA Zip Code 18002-5505	Purpose of Disbursement Cell Phone Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM] Subitemization of BB&T(04/04/14)

SUBTOTAL of Disbursements This Page (optional).....	6260.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period 260.95
City Washington	State DC	
Zip Code 20006-1152	Purpose of Disbursement Credit Card Charge	Transaction ID : B-E-7982
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 260.95
City Mountain View	State CA	
Zip Code 94043-1126	Purpose of Disbursement Compliance Software	Transaction ID : B-S-2183
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of BB&T(05/12/14)
State: District:		

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period 22
City Washington	State DC	
Zip Code 20006-1152	Purpose of Disbursement Bank Service Charge	Transaction ID : B-E-8019
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	282.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 2557.31 Transaction ID : B-E-7754
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Fundraising: Food & Beverage Candidate Name Category/Type 003	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1789.29 Transaction ID : B-E-7977
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Fundraising: Food & Beverage Candidate Name Category/Type 003	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Concentric Office, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 8136 Old Keene Mill Road Suite A300		Amount of Each Disbursement this Period 6125.7 Transaction ID : B-E-7985
City Springfield State VA Zip Code 22152-1853	Purpose of Disbursement Compliance Services Candidate Name Category/Type 001	
Office Sought: House Senate President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10472.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 73	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Conquest Communications Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 2812 Emerywood Parkway Suite 103		Amount of Each Disbursement this Period 2300 Transaction ID : B-E-7764
City Richmond	State VA Zip Code 23294-3728	
Purpose of Disbursement Fundraising: Phone Fundraising	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DMM Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 444 N Michigan Avenue Suite 3600		Amount of Each Disbursement this Period 2098 Transaction ID : B-E-7991
City Chicago	State IL Zip Code 60611-3901	
Purpose of Disbursement Fundraising: Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Epiphany Productions Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5068.94 Transaction ID : B-E-7442
City Alexandria	State VA Zip Code 22301-1015	
Purpose of Disbursement Fundraising: Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9466.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 73			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Epiphany Productions Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-7443
City Alexandria	State VA Zip Code 22301-1015	
Purpose of Disbursement Fundraising: Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Epiphany Productions Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 12134.4 Transaction ID : B-E-7916
City Alexandria	State VA Zip Code 22301-1015	
Purpose of Disbursement Fundraising Consulting & Expenses	Category/Type 003	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Epiphany Productions Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 10000 Transaction ID : B-S-2140
City Alexandria	State VA Zip Code 22301-1015	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Epiphany Productions Inc.(04/30/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17134.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Acqua AI 2		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 2053.85
City Washington	State DC	
Zip Code 20003-4311	Purpose of Disbursement Food & Beverage	Transaction ID : B-S-2139
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Epiphany Productions Inc.(04/30/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Grasslout.com		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 8.5
City ONLINE	State	
Zip Code	Purpose of Disbursement Fundraising: Credit Card Merchant Fee	Transaction ID : B-E-7727
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grasslout.com		Date of Disbursement MM / DD / YYYY 04 / 04 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 4.25
City ONLINE	State	
Zip Code	Purpose of Disbursement Fundraising: Credit Card Merchant Fee	Transaction ID : B-E-7966
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 6.63 Transaction ID : B-E-7967
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 3.63 Transaction ID : B-E-7968
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 1.62 Transaction ID : B-E-7969
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 191.62 Transaction ID : B-E-7970
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 19.24 Transaction ID : B-E-7971
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 37.99 Transaction ID : B-E-7972
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	248.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 37.99
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003	Transaction ID : B-E-7973
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 4.25
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003	Transaction ID : B-E-7974
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Grasslot.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address ONLINE		Amount of Each Disbursement this Period 3.12
City ONLINE	State Zip Code	
Purpose of Disbursement Fundraising: Credit Card Merchant Fee	003	Transaction ID : B-E-8005
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	45.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Italian Board of Guardians, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 7403 18th Avenue		Amount of Each Disbursement this Period 250 Transaction ID : B-E-7986
City Brooklyn State NY Zip Code 11204-5614	Purpose of Disbursement Advertising: Ad Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. Luke's Copy Shop		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 2506 Hylan Boulevard		Amount of Each Disbursement this Period 3875.47 Transaction ID : B-E-7761
City Staten Island State NY Zip Code 10306-4366	Purpose of Disbursement Advertising: Yards Signs & Posters Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) c. Max's ES-CA		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1559 Richmond Road		Amount of Each Disbursement this Period 500.83 Transaction ID : B-E-7993
City Staten Island State NY Zip Code 10304-2313	Purpose of Disbursement Fundraising: Food & Beverage Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4626.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Mercury		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 250 Greenwich Street Floor 36		Amount of Each Disbursement this Period 2510 Transaction ID : B-E-8007
City New York State NY Zip Code 10007-0040	Purpose of Disbursement Advertising: Brochures Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Orange32		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 5017 5th Street		Amount of Each Disbursement this Period 2030.38 Transaction ID : B-E-7769
City Long Island City State NY Zip Code 11101-5786	Purpose of Disbursement Administrative/Salary/Overhead: Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. P.S. 52 PTA		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 450 Buel Avenue		Amount of Each Disbursement this Period 150 Transaction ID : B-E-7783
City Staten Island State NY Zip Code 10305-2245	Purpose of Disbursement Advertising: Ad Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4690.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Patton Boggs		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 2550 M Street NW		Amount of Each Disbursement this Period 40000 Transaction ID : B-E-8006
City Washington State DC Zip Code 20037-1309	Purpose of Disbursement Legal Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Pietrosfight.org		Date of Disbursement MM / DD / YYYY 04 / 30 / 2014
Mailing Address 18 77th Street		Amount of Each Disbursement this Period 300 Transaction ID : B-E-7915
City Brooklyn State NY Zip Code 11209-2802	Purpose of Disbursement Advertising: Ad Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 04 / 21 / 2014
Mailing Address 401 W 15th Street Suite 520		Amount of Each Disbursement this Period 4.25 Transaction ID : B-E-8023
City Austin State TX Zip Code 78701-1671	Purpose of Disbursement Fundraising: Credit Card Merchant Fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	40304.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. PRcision LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 372 Ionia Avenue		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-7772
City Staten Island	State NY	
Zip Code 10312-3556	Purpose of Disbursement Fundraising: Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PRcision LLC		Date of Disbursement MM / DD / YYYY 05 / 12 / 2014
Mailing Address 372 Ionia Avenue		Amount of Each Disbursement this Period 2000 Transaction ID : B-E-7987
City Staten Island	State NY	
Zip Code 10312-3556	Purpose of Disbursement Fundraising: Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Public Opinion Strategies, LLC		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 214 N Fayette Street		Amount of Each Disbursement this Period 11000 Transaction ID : B-E-7920
City Alexandria	State VA	
Zip Code 22314-2433	Purpose of Disbursement Polling: Polling	Category/ Type 005
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Richmond County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 2300 Richmond Road		Amount of Each Disbursement this Period 250 Transaction ID : B-E-7988
City Staten Island State NY Zip Code 10314	Purpose of Disbursement Advertising: Ad Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Richmond County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 2300 Richmond Road		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-7994
City Staten Island State NY Zip Code 10314	Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Salient MG, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 575 Main Street Suite 251		Amount of Each Disbursement this Period 6000 Transaction ID : B-E-7774
City Laurel State MD Zip Code 20707-4353	Purpose of Disbursement Fundraising: Online Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	7250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Salient MG, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 575 Main Street Suite 251		Amount of Each Disbursement this Period 6,000 Transaction ID : B-E-7989
City Laurel State MD Zip Code 20707-4353	Purpose of Disbursement Fundraising: Online Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SCR & Associates LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 100 Tradecenter Suite G-700		Amount of Each Disbursement this Period 6,000 Transaction ID : B-E-7753
City Woburn State MA Zip Code 01801-1851	Purpose of Disbursement Fundraising: Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. SCR & Associates LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 100 Tradecenter Suite G-700		Amount of Each Disbursement this Period 1,840 Transaction ID : B-E-7992
City Woburn State MA Zip Code 01801-1851	Purpose of Disbursement Fundraising: Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12840.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 73			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. SeitchikHQ LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 107 S West Street # 130		Amount of Each Disbursement this Period 3500 Transaction ID : B-E-6328
City Alexandria	State VA Zip Code 22314-2824	
Purpose of Disbursement Fundraising Consulting for Committee	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. St. Anselm Catholic Academy		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 356 82nd Street		Amount of Each Disbursement this Period 150 Transaction ID : B-E-8000
City Brooklyn	State NY Zip Code 11209-3809	
Purpose of Disbursement Advertising: Ad	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Tarrance Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 201 N Union Street Suite 410		Amount of Each Disbursement this Period 17364 Transaction ID : B-E-6104
City Alexandria	State VA Zip Code 22314-2649	
Purpose of Disbursement Polling: Polling	Category/Type 005	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21014.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. The United Staten Island Veterans Organization, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 198 Justin Avenue		Amount of Each Disbursement this Period 300 Transaction ID : B-E-7777
City Staten Island	State NY Zip Code 10306-3744	
Purpose of Disbursement Advertising: Ad	Category/Type 004	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tuesday Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 101 N Carolina Avenue SE Apt. F		Amount of Each Disbursement this Period 200 Transaction ID : B-E-7775
City Washington	State DC Zip Code 20003-1849	
Purpose of Disbursement Annual Dues	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. VoterTrove		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 921 Cavalry Ride Trail		Amount of Each Disbursement this Period 2346.72 Transaction ID : B-E-7779
City Austin	State TX Zip Code 78732-2370	
Purpose of Disbursement Fundraising: Phone Fundraising	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2846.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. VoterTrove		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 921 Cavalry Ride Trail		Amount of Each Disbursement this Period 1900 Transaction ID : B-E-8010
City Austin State TX Zip Code 78732-2370	Purpose of Disbursement Fundraising: Telephone Fundraising Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. VOTESANE PAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address PO Box 2713		Amount of Each Disbursement this Period 375 Transaction ID : B-E-7914
City Alexandria State VA Zip Code 22301-0713	Purpose of Disbursement Fundraising: Credit Card Merchant Fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. VOTESANE PAC		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO Box 2713		Amount of Each Disbursement this Period 25 Transaction ID : B-E-8002
City Alexandria State VA Zip Code 22301-0713	Purpose of Disbursement Fundraising: Credit Card Merchant Fee Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Marc Alvarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 1 Center Place		Amount of Each Disbursement this Period 5000 Transaction ID : B-E-7975
City Staten Island	State NY	
Zip Code 10306-5711	Purpose of Disbursement Petitions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Chris Berardini		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 5573 Seminary Road Apt. 106		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-7752
City Falls Church	State VA	
Zip Code 22041-3549	Purpose of Disbursement Fundraising: Fundraising Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Joseph Gonzales		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 322 Lake Avenue		Amount of Each Disbursement this Period 676 Transaction ID : B-E-7760
City Staten Island	State NY	
Zip Code 10303-2610	Purpose of Disbursement Petitions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8676.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Joseph Gonzales		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 322 Lake Avenue		Amount of Each Disbursement this Period 351 Transaction ID : B-E-7919
City Staten Island	State NY Zip Code 10303-2610	
Purpose of Disbursement Petitions	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Btzalel Hirschhorn		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 770 Empire Avenue		Amount of Each Disbursement this Period 767.45 Transaction ID : B-E-7759
City Far Rockaway	State NY Zip Code 11691-4835	
Purpose of Disbursement Petitions	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Robert Leo Morgan III		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 55 E End Avenue Apt. 6K		Amount of Each Disbursement this Period 520 Transaction ID : B-E-7918
City New York	State NY Zip Code 10028-7934	
Purpose of Disbursement Petitions	001	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1638.45
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 73	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Alla Pometko		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 125 Oceana Drive E Apt. 7A		Amount of Each Disbursement this Period 1040 Transaction ID : B-E-7758
City Brooklyn	State NY	
Zip Code 11235-6691	Purpose of Disbursement Petitions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alla Pometko		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 125 Oceana Drive E Apt. 7A		Amount of Each Disbursement this Period 910 Transaction ID : B-E-7917
City Brooklyn	State NY	
Zip Code 11235-6691	Purpose of Disbursement Petitions	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	213197.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 73	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Christopher Ragucci		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 31 Hylan Boulevard Apt. 14D		Amount of Each Disbursement this Period 250 Transaction ID : B-E-7892
City Staten Island	State NY	
Zip Code 10305-2079	Purpose of Disbursement Contribution Refund: REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mark Seldon		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 108 W 39th Street Floor 4		Amount of Each Disbursement this Period 1500 Transaction ID : B-E-7756
City New York	State NY	
Zip Code 10018-3614	Purpose of Disbursement REFUND OF CONTRIBUTION	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Christian C. Trefz		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 140 Driftwood Lane		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-7895
City Trumbull	State CT	
Zip Code 06611-1805	Purpose of Disbursement Contribution Refund: NSF	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 73	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Bay Ridge St. Patrick's Day Parade		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1867 E 36th Street		Amount of Each Disbursement this Period 2150 Transaction ID : B-E-7763
City State Zip Code Brooklyn NY 11234-4409	Purpose of Disbursement Charitable Donation: Sponsor Donation	
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kings County Conservative Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 486 78th Street		Amount of Each Disbursement this Period 550 Transaction ID : B-E-7765
City State Zip Code Brooklyn NY 11209-3404	Purpose of Disbursement Charitable Donation: Donation	
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Metro Chamber Orchestra		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 8821 16th Avenue		Amount of Each Disbursement this Period 300 Transaction ID : B-E-7999
City State Zip Code Brooklyn NY 11214-5801	Purpose of Disbursement Charitable Donation: Donation	
Candidate Name	Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 73	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Michael Grimm for Congress

Full Name (Last, First, Middle Initial) A. Project Hospitality		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 100 Park Avenue		Amount of Each Disbursement this Period 350 Transaction ID : B-E-7773
City Staten Island	State NY	
Zip Code 10302-1440	Purpose of Disbursement Charitable Donation: Sponsor Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Richmond County Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 2300 Richmond Road		Amount of Each Disbursement this Period 1250 Transaction ID : B-E-7976
City Staten Island	State NY	
Zip Code 10314	Purpose of Disbursement Charitable Donation: Donation/Tickets	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Tri-Star Tours LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO Box 140973 86 Sunset Ave		Amount of Each Disbursement this Period 575 Transaction ID : B-E-7990
City Staten Island	State NY	
Zip Code 10314-0973	Purpose of Disbursement Charitable Donation: Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2175.00
TOTAL This Period (last page this line number only).....	5175.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 73
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patton Boggs	Nature of Debt (Purpose): Administrative/Salary/Overhead: Legal Fees
Mailing Address 2550 M Street NW	
City State Zip Code Washington DC 20037-1309	

Outstanding Balance Beginning This Period 417477.96	Transaction ID : SD10-DEBT8009	
Amount Incurred This Period 43109.25	Payment This Period 40000	Outstanding Balance at Close of This Period 420587.21

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express	Nature of Debt (Purpose): Administrative/Salary/Overhead: Credit Card Charges
Mailing Address PO Box 650448	
City State Zip Code Dallas TX 75265-0448	

Outstanding Balance Beginning This Period 5245.66	Transaction ID : SD10-DEBT7853	
Amount Incurred This Period 0	Payment This Period 5245.66	Outstanding Balance at Close of This Period 0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Epiphany Productions Inc.	Nature of Debt (Purpose): Fundraising: Fundraising Consulting
Mailing Address 104 Hume Avenue	
City State Zip Code Alexandria VA 22301-1015	

Outstanding Balance Beginning This Period 10068.94	Transaction ID : SD10-DEBT7443	
Amount Incurred This Period 0	Payment This Period 10068.94	Outstanding Balance at Close of This Period 0

1) SUBTOTALS This Period This Page (optional)	420587.21
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

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

NAME OF COMMITTEE (In Full)

Michael Grimm for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SeitchikHQ LLC		Nature of Debt (Purpose): Fundraising: Fundraising Consulting for Committee
Mailing Address 107 S West Street # 130		
City State	Zip Code	
Alexandria VA	22314-2824	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT6328	
<input type="text" value="3500"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="3500"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Tarrance Group		Nature of Debt (Purpose): Polling: Polling
Mailing Address 201 N Union Street Suite 410		
City State	Zip Code	
Alexandria VA	22314-2649	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT6104	
<input type="text" value="17364"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="17364"/>	<input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="420587.21"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="420587.21"/>