

**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

Espaillat for Congress

ADDRESS (number and street)

210 Sherman Avenue

Suite B

☐ Check if different
than previously
reported. (ACC)

New York

NY

10034

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00518365

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

13

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2012

through

M M / D D / Y Y Y Y
09 / 30 / 2012

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 Seny Taveras

Signature of Treasurer

Seny Taveras

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 15 / 2012

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 13

Write or Type Committee Name

Espallat for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	2

	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))....	8805.00	376794.75
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8805.00	376794.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	23253.20	294561.22
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	23253.20	294561.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	65285.33	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1500.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

Espaillat for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	2

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).....

8650.00

370564.75

(ii) Unitemized.....

155.00

980.00

(iii) TOTAL of contributions from individuals ▶

8805.00

371544.75

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

5250.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

8805.00

376794.75

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

8805.00

376794.75

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	23253.20	294561.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	23253.20	294561.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	79733.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8805.00
25. SUBTOTAL (add Line 23 and Line 24).....	88538.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	23253.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	65285.33

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

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

FOR LINE NUMBER:

PAGE 5 OF 13

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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)
Espallat for Congress

A. Full Name (Last, First, Middle Initial) Miguel Avila-Rondon		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address 914 A. Columbus Avenue		Transaction ID : SA11AI.5147	
City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period 450.00
FEC ID number of contributing federal political committee. C			
Name of Employer Physician	Occupation		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 450.00		
B. Full Name (Last, First, Middle Initial) Scott Dames		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2012	
Mailing Address 487 Amsterdam Avenue APT 4P		Transaction ID : SA11AI.5140	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 1750.00
FEC ID number of contributing federal political committee. C			
Name of Employer College Administration	Occupation		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 1750.00		
C. Full Name (Last, First, Middle Initial) Scott Dames		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2012	
Mailing Address 487 Amsterdam Avenue APT 4P		Transaction ID : SA11AI.5133	
City New York	State NY	Zip Code 10024	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer College Administration	Occupation		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2250.00		
SUBTOTAL of Receipts This Page (optional).....		2700.00	
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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Espallat for Congress

A. Full Name (Last, First, Middle Initial) john O'brien		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2012	
Mailing Address		Transaction ID : SA11AI.5130	
City State Zip Code		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 2500.00	
B. Full Name (Last, First, Middle Initial) Raul Quiroz		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2012	
Mailing Address 995 Amsterdam Avenue apt. 6W		Transaction ID : SA11AI.5129	
City State Zip Code New York NY 10025		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Self			
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	
C. Full Name (Last, First, Middle Initial) lilliana saneauz		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2012	
Mailing Address		Transaction ID : SA11AI.5142	
City State Zip Code		Amount of Each Receipt this Period 2450.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 2455.00	
SUBTOTAL of Receipts This Page (optional).....		5950.00	
TOTAL This Period (last page this line number only).....		8650.00	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Espallat for Congress

Full Name (Last, First, Middle Initial)

A. 5 esquina

Mailing Address

City State Zip Code

Purpose of Disbursement
local tv ads

004

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2012

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.5114

B. shaun abreu

Mailing Address

City State Zip Code

Purpose of Disbursement
primary day/canvas

001

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2012

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.5093

C. Aneiry BatistaMailing Address 3 Fordham Hill Oval
Apt. 17BCity State Zip Code
Bronx NY 10468Purpose of Disbursement
reimbursement

001

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2012

Amount of Each Disbursement this Period

986.55

Transaction ID : SB17.5116

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

2486.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Espallat for Congress

Full Name (Last, First, Middle Initial)

A. carmen chavez

Mailing Address

City State Zip Code

Purpose of Disbursement
music - election night

007

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2012

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.5109

B. eddie cuesta

Mailing Address

City State Zip Code

Purpose of Disbursement
reimbursement

001

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2012

Amount of Each Disbursement this Period

214.05

Transaction ID : SB17.5079

C. marcia garcia

Mailing Address

City State Zip Code

Purpose of Disbursement
reimbursement

001

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2012

Amount of Each Disbursement this Period

245.00

Transaction ID : SB17.5086

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

809.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Espallat for Congress

Full Name (Last, First, Middle Initial)

A. garden gourmet

Mailing Address Broadway

City	State	Zip Code
Bronx	NY	10463

Purpose of Disbursement
event food

007

Candidate Name

Espallat for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2012

Amount of Each Disbursement this Period

554.48

Transaction ID : SB17.5117

B. damaso gonzalez

Mailing Address 131 white plains road

City	State	Zip Code
bronx	NY	10473

Purpose of Disbursement
june 2012 fees

007

Candidate Name

Espallat for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2012

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.5112

C. Lino Press

Mailing Address 4482 Broadway

City	State	Zip Code
New York	NY	10040

Purpose of Disbursement
inv. #28435/28414

006

Candidate Name

Espallat for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2012

Amount of Each Disbursement this Period

4250.00

Transaction ID : SB17.5106

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

6304.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Espallat for Congress

Full Name (Last, First, Middle Initial)

A. Lino Press

Mailing Address 4482 Broadway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2012

City	State	Zip Code
New York	NY	10040

Amount of Each Disbursement this Period

1710.91

Purpose of Disbursement
inv. #28414/28446

006

Transaction ID : SB17.5107

Candidate Name

Espallat for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Full Name (Last, First, Middle Initial)

B. mamajuana's Restaurant

Mailing Address 247 Dyckman avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		21		2012

City	State	Zip Code
new york	NY	10034

Amount of Each Disbursement this Period

998.00

Purpose of Disbursement
thank you event

007

Transaction ID : SB17.5126

Candidate Name

Espallat for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

Full Name (Last, First, Middle Initial)

C. noquel matos

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2012

City	State	Zip Code

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
primary day/canvas op

001

Transaction ID : SB17.5095

Candidate Name

Espallat for CongressCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 13

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

3308.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Espallat for Congress

Full Name (Last, First, Middle Initial)

A. Metro StrategiesMailing Address 5030 Broadway
Suite 807

City New York State NY Zip Code 10034

Purpose of Disbursement
robocalls

005

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2012

Amount of Each Disbursement this Period

2423.30

Transaction ID : SB17.5078

B. maria morillo

Mailing Address

City State Zip Code

Purpose of Disbursement
reimbursement

001

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2012

Amount of Each Disbursement this Period

272.01

Transaction ID : SB17.5087

c. Nelly ReyesMailing Address 210 Sherman Avenue
Unit 130

City New York State NY Zip Code 10034

Purpose of Disbursement
call center

007

Category/
Type

Candidate Name

Espallat for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2012

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5099

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

3695.31

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 13

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Espallat for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Glaction LLCNature of Debt (Purpose):
consult fee due

Mailing Address 5030 Broadway

City State

Zip Code

New York

NY

10034

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5144

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

1500.00

2) **TOTALS** This Period (last page this line number only)

1500.00

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)

1500.00