

# FEC FORM 3P

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

PATAKI FOR PRESIDENT INC

ADDRESS (number and street)

132 E 43RD ST #614

Check if different than previously reported. (ACC)

NEW YORK

NY

10017

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00578245

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Feb 20 (M2)
- May 20 (M5)
- Aug 20 (M8)
- Nov 20 (M11)
- Mar 20 (M3)
- Jun 20 (M6)
- Sep 20 (M9)
- Dec 20 (M12)
- Apr 20 (M4)
- Jul 20 (M7)
- Oct 20 (M10)
- Jan 31 (YE)

Thirtieth day report following the General Election

on MM / DD / YYYY

Twelfth day report preceding election

on MM / DD / YYYY in the State of

Is this Report an Amendment?

yes

no

5. Covering Period

MM / DD / YYYY 07 / 01 / 2015

through

MM / DD / YYYY 09 / 30 / 2015

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

Type or Print Name of Treasurer

Julie Pyun

Signature of Treasurer

Julie Pyun

[Electronically Filed]

Date

MM / DD / YYYY 10 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

# PATAKI FOR PRESIDENT INC

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

## SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	<input type="text" value="207620.25"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	<input type="text" value="153513.89"/>
8. SUBTOTAL (Lines 6 and 7) .....	<input type="text" value="361134.14"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	<input type="text" value="347563.59"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="13570.55"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="20000.00"/>
13. EXPENDITURES SUBJECT TO LIMITATION .....	<input type="text" value="395738.30"/>

## NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	<input type="text" value="389308.85"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="395738.30"/>

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

**PATAKI FOR PRESIDENT INC**

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
09 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	127754.36	365090.98
(ii) unitemized .....	5759.53	24217.87
(iii) Total contributions .....	133513.89	389308.85
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) .....	133513.89	389308.85
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	20000.00	20000.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	20000.00	20000.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	0.00	0.00
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	0.00	0.00
21. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	153513.89	409308.85

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

**PATAKI FOR PRESIDENT INC**

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
09 / 30 / 2015

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	347563.59	395738.30
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) .....	0.00	0.00
29. OTHER DISBURSEMENTS .....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	347563.59	395738.30

**III. CONTRIBUTED ITEMS  
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00	
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FEC FORM 3P,  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES  
BY STATE FOR  
A PRESIDENTIAL CANDIDATE**  
(Used Only by Primary Committees Receiving  
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00578245

PATAKI FOR PRESIDENT INC

ADDRESS (number and street) 132 E 43RD ST #614

NEW YORK NY 10017  
CITY STATE ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	4712.00	4712.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	49914.93	50942.71
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	40000.00	40000.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
<b>TOTALS</b>	<b>94626.93</b>	<b>95654.71</b>

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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

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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Bailey**

Mailing Address 2210 Lakeshore Road  
PO Box 12

City State Zip Code  
Essex NY 12936

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5939**

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

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Marilena Barletta**

Mailing Address 6649 Sorrel Street

City State Zip Code  
McLean VA 22101

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Community Volunteer Community Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6195**

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

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Barnes**

Mailing Address 1401 S. Edgewood Street  
Unit 493

City State Zip Code  
Arlington VA 22204

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DCBA Law & Policy LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5971**

Date of Receipt  
M M / D D / 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).....



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick W. Caratan**

Mailing Address 8201 Camino Media  
Apt. 197

City State Zip Code  
Bakersfield CA 93311

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6147**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David M. Catalfamo**

Mailing Address 22 Maple Avenue

City State Zip Code  
Slingerlands NY 12159

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Park Strategies Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6093**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 31 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Catsimatidis**

Mailing Address 817 Fifth Avenue  
Fl. 14

City State Zip Code  
New York NY 10065-7254

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Big Apple Group CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5969**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 31 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 10 / 107

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)

**PATAKI FOR PRESIDENT INC**

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

**Mrs. Margo Catsimatidis**

Mailing Address 817 Fifth Avenue

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5970**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

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

**Mr. William G. Cavanagh**

Mailing Address 966 Plymouth Street

City State Zip Code  
Pelham NY 10803

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Chadbourne & Park Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6076**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

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

**Ms. Charlene Chain**

Mailing Address 117 Main Street

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6199**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

**Subtotal Of Receipts This Page (optional)**.....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William Chain**

Mailing Address 117 Main Street

City Farmington State CT Zip Code 06032

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WAC auto Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6197**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jane Forbes Clark**

Mailing Address One Rockefeller Plaza  
31st Floor

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self Executive

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5954**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 23 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Sandra L. Cuyler**

Mailing Address 8171 Bay Colony Drive  
No. 1902

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5931**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 12 / 107

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)

**PATAKI FOR PRESIDENT INC**

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

**Mr. David Dwyer**

Mailing Address 311 Oxford Drive

City State Zip Code  
Short Hills NJ 07078

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Bloomberg Financial Analyst

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6205**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			30			2015			

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>
--------------------------------------

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

**Richard Farren**

Mailing Address 400 West End Avenue

City State Zip Code  
New York NY 10024

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6202**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
-------------------------------------

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

**Mr. Joseph A. Ferrara**

Mailing Address 15 St. Paul's Place

City State Zip Code  
Garden City NY 11530

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Ferrara Mason Materials Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6095**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			31			2015			

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

**Subtotal Of Receipts This Page** (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="checked" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. April Foley</b>		<b>Transaction ID : SA17A.5906</b>
Mailing Address <b>45 Smith Ridge Road</b>		Date of Receipt
City <b>South Salem</b> State <b>NY</b> Zip Code <b>10590</b>		<input type="text" value="07"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer <b>Self-employed</b>	Occupation <b>Corporate director</b>	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. April Foley</b>		<b>Transaction ID : SA17A.5918</b>
Mailing Address <b>45 Smith Ridge Road</b>		Date of Receipt
City <b>South Salem</b> State <b>NY</b> Zip Code <b>10590</b>		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer <b>Self-employed</b>	Occupation <b>Corporate director</b>	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2000.00"/>	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Friends of Cahill</b>		<b>Transaction ID : SA17A.5957</b>
Mailing Address <b>P.O. Box 580295</b>		Date of Receipt
City <b>Flushing</b> State <b>NY</b> Zip Code <b>11958</b>		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
FEC ID number of contributing federal political committee. <input type="text" value="C C00578245"/>		Amount of Each Receipt this Period
Name of Employer <b>Friends of Cahill</b>	Occupation <b>Friends of Cahill</b>	
Receipt For: 2016 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 14 / 107

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Dana Frix**

Mailing Address 6649 Sorrel Street

City State Zip Code  
McLean VA 22101

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Chadbourne & Parke Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6193**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Walter J. Ganzi Jr.**

Mailing Address 8171 Bay Colony Drive  
No. 1902

City State Zip Code  
Naples FL 34108

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Palm Management Corp. Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5930**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles A. Gargano**

Mailing Address 5 Shore Lane

City State Zip Code  
Bay Shore NY 11706

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6149**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Joseph Grano Jr.</b>		<b>Transaction ID : SA17A.6097</b>																					
Mailing Address <b>84 Glen Alpin Road</b>		Date of Receipt																					
City <b>New Vernon</b> State <b>NJ</b> Zip Code <b>07976</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>01</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			01			2015			
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09			01			2015																	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer <b>Centurion Holdings LLC</b> Occupation <b>CEO</b>		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td>2700.00</td><td></td><td></td><td></td> </tr> </table>																		2700.00			
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<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Paul Guillaro</b>		<b>Transaction ID : SA17A.6208</b>																					
Mailing Address <b>75 Random Farms Drive</b>		Date of Receipt																					
City <b>Chappaqua</b> State <b>NY</b> Zip Code <b>10514</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>09</td><td></td><td></td><td>23</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	09			23			2015			
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09			23			2015																	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer <b>Information Requested</b> Occupation <b>President</b>		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td>2700.00</td><td></td><td></td><td></td> </tr> </table>																		2700.00			
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						2700.00																	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ms. Dorothy M. Harris</b>		<b>Transaction ID : SA17A.6017</b>																					
Mailing Address <b>#8 Dublin Drive</b>		Date of Receipt																					
City <b>Niskayuna</b> State <b>NY</b> Zip Code <b>12309</b>		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>08</td><td></td><td></td><td>11</td><td></td><td></td><td>2015</td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	08			11			2015			
M	M	/	D	D	/	Y	Y	Y	Y														
08			11			2015																	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																					
Name of Employer <b>International Code Council</b> Occupation <b>Vice President</b>		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td> </tr> </table>																		250.00			
						250.00																	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼																					
		<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td>250.00</td><td></td><td></td><td></td> </tr> </table>																		250.00			
						250.00																	

**Subtotal Of Receipts This Page** (optional).....▶ 

						5650.00			

**Total This Period** (last page this line number only).....▶ 


**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Ashley Hayden**

Mailing Address 1835 Palisades Terrace

City State Zip Code  
Lake Oswego OR 97034

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Hayden Properties Investor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6101**

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

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Yeeling Hayden**

Mailing Address 1825 Palisades Terrace

City State Zip Code  
Oswego Lake OR 97034

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Hayden Propserities Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6103**

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

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Heaney**

Mailing Address 2 Bontecue Road

City State Zip Code  
Millbrook NY 12545

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Submarine Rock Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6052**

Date of Receipt  
M M / D D / 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).....



# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Leslie Heaney**

Mailing Address 2 Bontecou Road

City Millbrook State NY Zip Code 12545

FEC ID number of contributing federal political committee.

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6080**

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 27 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Ruth Ann Heller**

Mailing Address 4949 North Highway A-1-A  
#203

City Fort Pierce State FL Zip Code 34949

FEC ID number of contributing federal political committee.

Name of Employer Snowmark Corporation Occupation Personal Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5968**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Judith Iovino**

Mailing Address 1115 Fifth Avenue

City New York State NY Zip Code 10028

FEC ID number of contributing federal political committee.

Name of Employer Self Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6099**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2015

Amount of Each Receipt this Period

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Laufer**

Mailing Address 153 Onslow Place

City	State	Zip Code
Kew Gardens	NY	11415

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Laufer Family Foundation	Principal

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5940**

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

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mt. Jerry Levin**

Mailing Address 7941 Fisher Island Drie

City	State	Zip Code
Fisher Island	FL	33109

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JW Levin Management Partners	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6048**

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

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James A. Longo**

Mailing Address 410 S West Street

City	State	Zip Code
Falls Church	VA	22046

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Palm Restaurant Group	CFO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6105**

Date of Receipt  
M M / D D / Y Y Y Y  
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Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

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

Mailing Address 9903 Santa Monica Blvd

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6022**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Anthony E. Mann**

Mailing Address 44 Pheasant Lane

City State Zip Code  
Greenwich CT 06830

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
E-J Electric Installation President and CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6015**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J. Robert Mann Jr.**

Mailing Address 519 Alda Road

City State Zip Code  
Mamaroneck NY 10543

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
E-J Electric Installation Co. Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6013**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Gretchen Massey**

Mailing Address 76 Shore Drive

City	State	Zip Code
Larchmont	NY	10538

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6140**

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

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul J. Massey Jr.**

Mailing Address 76 Shore Drive

City	State	Zip Code
Larchmont	NY	10538

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Cushman Wakefield	President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6138**

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

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth McCaul**

Mailing Address 95 Feeks Lane

City	State	Zip Code
Lattington	NY	11560

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
Promontory Financial Group	Partner-in-Charge

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6151**

Date of Receipt  
M M / D D / 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).....

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. William T. McCormick Jr.</b>		<b>Transaction ID : SA17A.6109</b>
Mailing Address <b>8171 Bay Colony Dr.</b> <b>#1804</b>		Date of Receipt M M / D D / Y Y Y Y <b>09 / 03 / 2015</b>
City <b>Naples</b>	State <b>FL</b>	Zip Code <b>34108</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Amount of Each Receipt this Period <b>500.00</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>500.00</b>	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. James McGuire</b>		<b>Transaction ID : SA17A.6162</b>
Mailing Address <b>32 Morton Street</b> <b>Apt. 4A</b>		Date of Receipt M M / D D / Y Y Y Y <b>09 / 24 / 2015</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10014</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>Dechert LLP</b>	Occupation <b>Attorney</b>	Amount of Each Receipt this Period <b>2000.00</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Michael Mckeon</b>		<b>Transaction ID : SA17A.6191</b>
Mailing Address <b>134 Circle Drive</b>		Date of Receipt M M / D D / Y Y Y Y <b>09 / 27 / 2015</b>
City <b>Manhasset</b>	State <b>NY</b>	Zip Code <b>11030</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>	
Name of Employer <b>Mercury</b>	Occupation <b>Consultant</b>	Amount of Each Receipt this Period <b>2700.00</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>2700.00</b>	

**Subtotal Of Receipts This Page** (optional)..... **5200.00**

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Ornella Morrow**

Mailing Address 825 Third Avenue  
Suite 1801

City State Zip Code  
New York NY 10022

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Retired Fashion Buyer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6009**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Morrow**

Mailing Address 825 Third Avenue  
Suite 1801

City State Zip Code  
New York NY 10022

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Kenilworth Equities Real Estate Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6011**

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert L. Mushkin**

Mailing Address 8171 Bay Colony Dr.  
#703

City State Zip Code  
Naples FL 34108

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6107**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 03 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 24 / 107

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Nicole Newman**

Mailing Address 1491 Carla Ridge

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer Occupation  
School Student

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.6131**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 18 / 2015

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William O'Shaughnessy**

Mailing Address P.O. Box 1776

City State Zip Code  
Litchfield CT 06759

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

Name of Employer Occupation  
Whitney Media President and Editorial Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.5947**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 21 / 2015

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William O'Shaughnessy**

Mailing Address P.O. Box 1776

City State Zip Code  
Litchfield CT 06759

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

Name of Employer Occupation  
Whitney Media President and Editorial Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

**Transaction ID : SA17A.6172**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2015

Amount of Each Receipt this Period  
1000.00

**Subtotal Of Receipts This Page** (optional).....▶ 4700.00

**Total This Period** (last page this line number only).....▶



**SCHEDULE A-P**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

(check only one)

PAGE 25 / 107

16  17a  17b  17c  17d  18  
 19a  19b  20a  20b  20c  21

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NAME OF COMMITTEE (In Full)

**PATAKI FOR PRESIDENT INC**

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

Mailing Address 6046 Masondale Rd

City Alexandria State VA Zip Code 22315

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

Name of Employer Medical leave Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
620.16

**Transaction ID : SA17A.5907**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 05 / 2015

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Bart Patterson**

Mailing Address 6046 Masondale Rd

City Alexandria State VA Zip Code 22315

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

Name of Employer Medical leave Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
720.16

**Transaction ID : SA17A.5919**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 17 / 2015

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Julie Paul**

Mailing Address 164 Jordan Ave.

City San Francisco State CA Zip Code 94118

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

Name of Employer Self-Employed Occupation Entrepreneur

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

**Transaction ID : SA17A.6201**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2015

Amount of Each Receipt this Period  
750.00

**Subtotal Of Receipts This Page** (optional).....▶ **950.00**

**Total This Period** (last page this line number only).....▶

# SCHEDULE A-P ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="checked" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Pohl**

Mailing Address 1707 Brookfield Manor

City	State	Zip Code
Columbia	MO	65204

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

Name of Employer	Occupation
Self	Business Owner

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

**Transaction ID : SA17A.6050**

Date of Receipt

M M / D D / Y Y Y Y
08 / 18 / 2015

Amount of Each Receipt this Period

_____ 1000.00
---------------

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Erich Reimer**

Mailing Address 2401 Arlington Blvd.  
Apt. 43

City	State	Zip Code
Charlottesville	VA	22903

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

Name of Employer	Occupation
U.S. Treasury Department	Legal Department

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 275.00

**Transaction ID : SA17A.5902**

Date of Receipt

M M / D D / Y Y Y Y
07 / 03 / 2015

Amount of Each Receipt this Period

_____ 25.00
-------------

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Erich Reimer**

Mailing Address 2401 Arlington Blvd.  
Apt. 43

City	State	Zip Code
Charlottesville	VA	22903

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

Name of Employer	Occupation
U.S. Treasury Department	Legal Department

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

**Transaction ID : SA17A.5914**

Date of Receipt

M M / D D / Y Y Y Y
07 / 17 / 2015

Amount of Each Receipt this Period

_____ 25.00
-------------

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 1050.00

**Total This Period** (last page this line number only).....▶ \_\_\_\_\_

# SCHEDULE A-P ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Frederick Reis**

Mailing Address 133 Fort Wetherill Road

City	State	Zip Code
Jamestown	RI	02835

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
The Wetherill Group LLC	Executive

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5949**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**REYNOLDS FOR CONGRESS**

Mailing Address PO BOX 15388

City	State	Zip Code
ROCHESTER	NY	14615

FEC ID number of contributing federal political committee.

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5944**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	5

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Albert M. Rosenblatt**

Mailing Address 300 Freedom Rd.

City	State	Zip Code
Pleasant Valley	NY	12569

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
McCabe & Mack LLP	Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6156**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	5

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. E. John Rosenwald**

Mailing Address 944 Fifth Avenue

City State Zip Code  
New York NY 10021

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
JP Morgan Chase Chairman Emeritus

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6158**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			22			2015			

Amount of Each Receipt this Period

<input type="text" value="1500.00"/>
--------------------------------------

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Judith Schreyer**

Mailing Address 60 East End Avenue  
Apt. 20C

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6056**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

<input type="text" value="1350.00"/>
--------------------------------------

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Leslie J. Schreyer**

Mailing Address 60 East End Avenue  
Apt. 20C

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Chadbourne & Park Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6058**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
08			25			2015			

Amount of Each Receipt this Period

<input type="text" value="1350.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

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Detailed Summary Page

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Gary Segal</b>		<b>Transaction ID : SA17A.6074</b>	
Mailing Address <b>10 West Street PH2B</b>		Date of Receipt MM / DD / YYYY <b>08 / 26 / 2015</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10704</b>	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2500.00</b>		
Name of Employer <b>Five Star Electric Corp.</b>	Occupation <b>Executive</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>2500.00</b>		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Joseph J. Seymour</b>		<b>Transaction ID : SA17A.5912</b>	
Mailing Address <b>4 Saybrook Drive</b>		Date of Receipt MM / DD / YYYY <b>07 / 07 / 2015</b>	
City <b>Glenmont</b>	State <b>NY</b>	Zip Code <b>12077</b>	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>		
Name of Employer <b>Pataki-Cahill Group</b>	Occupation <b>Managing Director</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>1000.00</b>		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ms. Patricia Simons</b>		<b>Transaction ID : SA17A.6091</b>	
Mailing Address <b>1 Mill Road</b>		Date of Receipt MM / DD / YYYY <b>08 / 31 / 2015</b>	
City <b>North Hampton</b>	State <b>NH</b>	Zip Code <b>03862</b>	
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>		
Name of Employer <b>Friends of Nancy Stiles</b>	Occupation <b>Staff</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <b>1000.00</b>		

**Subtotal Of Receipts This Page** (optional)..... **4500.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 30 / 107

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Diane Snowden**

Mailing Address 10150 St. Augustine Ave.

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.5952**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

2	7	0	0	.	0	0
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**B.** Full Name (Last, First, Middle Initial)  
**Mr. Guy Snowden**

Mailing Address 10150 St. Augustine Ave.

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.5951**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

Amount of Each Receipt this Period

2	7	0	0	.	0	0
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**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Stone**

Mailing Address 104 West 70th Street  
Apt. 9E

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Columbia University Professor of Law

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.5928**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	5

Amount of Each Receipt this Period

5	0	0	.	0	0
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**Subtotal Of Receipts This Page** (optional).....▶ 

5	9	0	0	.	0	0
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**Total This Period** (last page this line number only).....▶ 

5	9	0	0	.	0	0
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**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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<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)

**PATAKI FOR PRESIDENT INC**

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

**Mrs. Brianne Taskopoulos**

Mailing Address 5309 Retreat Way

City State Zip Code  
Carmichael CA 95608

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6210**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

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

**Mr. Kyriokos Taskopoulos**

Mailing Address 5309 Retreat Way

City State Zip Code  
Carmichael CA 95608

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
AKT Development Corp President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6212**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

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

**Ms. Eve Toles**

Mailing Address 14081 Snowbird Lane

City State Zip Code  
Victorville CA 92394

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self Employed Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6037**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
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**Subtotal Of Receipts This Page (optional)**.....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 107

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

<b>A. Full Name (Last, First, Middle Initial)</b> Tom PAC Federal Multi-Candidate Committee Mailing Address P.O. Box 16488			<b>Transaction ID : SA17A.5945</b> Date of Receipt MM / DD / YYYY 07 / 20 / 2015
City Arlington	State VA	Zip Code 22215	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee.		C C00578245	
Name of Employer TomPAC Federal Multi-Candidate Committ	Occupation TomPAC Federal Multi-Candidate Committ		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Claudia Toomey Mailing Address 5115 Mandell Street			<b>Transaction ID : SA17A.5989</b> Date of Receipt MM / DD / YYYY 08 / 05 / 2015
City Houston	State TX	Zip Code 77008	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 1000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mr. Richard Toomey Mailing Address 5115 Mandell Street			<b>Transaction ID : SA17A.5980</b> Date of Receipt MM / DD / YYYY 08 / 05 / 2015
City Houston	State TX	Zip Code 77006	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Tejas Toyota	Occupation Management		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Election Cycle-to-Date ▼ 1000.00

**Subtotal Of Receipts This Page** (optional).....▶ 2500.00

**Total This Period** (last page this line number only).....▶



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Peter Wendell**

Mailing Address 3550 Washington Street

City State Zip Code  
San Francisco CA 94118

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Sierra Ventures Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6214**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2015

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Heather Williams**

Mailing Address 36 Audubon Drive

City State Zip Code  
Amherst NY 14226

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Jon and Heather Williams LLC Agent

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5941**

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2015

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Scott Withee**

Mailing Address 9736 Lennice Way

City State Zip Code  
Bristow VA 20136

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Prince William County Schools Naval Architect

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6165**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2015

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)  
**PATAKI FOR PRESIDENT INC**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Wood**

Mailing Address 7 Manor Pond Lane

City Irvington State NY Zip Code 10533

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

Name of Employer Plaza Construction Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.6178**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 25 / 2015

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Irving Yoskowitz**

Mailing Address 11517 Highland Farm Road

City Potomac State MD Zip Code 20854

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

Name of Employer Crowell & Moring Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.6113**

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 09 / 2015

Amount of Each Receipt this Period  
1000.00

**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

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....▶ 2000.00

**Total This Period** (last page this line number only).....▶ 127754.36

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input checked="" 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)

**PATAKI FOR PRESIDENT INC**

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

**Mr. George Pataki**

Mailing Address 1301 6th Avenue  
24th Floor

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Chadbourne & Parke Counsel

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20000.00

**Transaction ID : SA19A.6387**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	5

Personal Loan

Amount of Each Receipt this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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
---	---	---	---	---	---	---	---	---	---

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
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

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**Subtotal Of Receipts This Page** (optional).....▶ 

20000.00
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**Total This Period** (last page this line number only).....▶ 

20000.00
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. 3 West Club</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 3 West 51st Street		<b>Transaction ID : SB23.6276</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	Amount of Each Disbursement this Period 983.67
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Sabina Abdullayeva</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 545 Center Blvd. Apt 3705		<b>Transaction ID : SB23.6329</b>
City Long Island City	State NY	
Zip Code 11109	Purpose of Disbursement Reimbursement - Travel Expenses	Amount of Each Disbursement this Period 390.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Amtrak</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2015
Mailing Address Pennsylvania Station		<b>Transaction ID : SB23.6329.0</b>
City New York	State NY	
Zip Code 10001	Purpose of Disbursement Train	Amount of Each Disbursement this Period 390.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 983.67

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6265</b>
City Merrimack	State NH	
Purpose of Disbursement NH Coordinator Salary	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6333</b>
City Merrimack	State NH	
Purpose of Disbursement NH Coordinator Salary	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6334</b>
City Merrimack	State NH	
Purpose of Disbursement Mileage	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 561.87
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 10561.87

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6334.0</b>
City Merrimack	State NH	
Purpose of Disbursement Mileage	Category/ Type 101	Amount of Each Disbursement this Period 561.87
Candidate Name PATAKI FOR PRESIDENT INC	[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6365</b>
City Merrimack	State NH	
Purpose of Disbursement NH Coordinator Salary	Category/ Type 104	Amount of Each Disbursement this Period 5000.00
Candidate Name PATAKI FOR PRESIDENT INC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6385</b>
City Merrimack	State NH	
Purpose of Disbursement Mileage	Category/ Type 104	Amount of Each Disbursement this Period 758.31
Candidate Name PATAKI FOR PRESIDENT INC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 5758.31

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Cal Akers</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 6 Elm Street		<b>Transaction ID : SB23.6385.0</b>
City Merrimack	State NH	
Purpose of Disbursement Mileage	Zip Code 03054	Amount of Each Disbursement this Period 758.31
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. American Express Merchant Services</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address P.O. Box 2878		<b>Transaction ID : SB23.6225</b>
City Omaha	State NE	
Purpose of Disbursement Merchant Fee	Zip Code 68103	Amount of Each Disbursement this Period 876.31
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. American Express Merchant Services</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address P.O. Box 2878		<b>Transaction ID : SB23.6247</b>
City Omaha	State NE	
Purpose of Disbursement Merchant Fee	Zip Code 68103	Amount of Each Disbursement this Period 208.69
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 1085.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. American Express Merchant Services**

Mailing Address P.O. Box 2878

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
Merchant Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : SB23.6257

Amount of Each Disbursement this Period

329.53

Full Name (Last, First, Middle Initial)

**B. Arent Fox LLP**

Mailing Address 1717 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Professional Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : SB23.6362

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**c. Bank of America**

Mailing Address 200 Park Avenue

City New York State NY Zip Code 10166

Purpose of Disbursement  
Bank Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : SB23.6227

Amount of Each Disbursement this Period

100.00

Subtotal Of Receipts This Page (optional)..... 5429.53

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 03 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6231</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6232</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6233</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 75.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6234</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 125.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6240</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6242</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 5.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 155.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6244</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6245</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6249</b>
City New York	State NY	
Zip Code 10166	Purpose of Disbursement Bank Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 75.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6250</b>
City New York	State NY	
Purpose of Disbursement Bank Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 25.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6253</b>
City New York	State NY	
Purpose of Disbursement Bank Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 25.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6255</b>
City New York	State NY	
Purpose of Disbursement Bank Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 25.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 75.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6300</b>
City New York	State NY	
Purpose of Disbursement Bank Fee	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 200 Park Avenue		<b>Transaction ID : SB23.6264</b>
City New York	State NY	
Purpose of Disbursement Bank Fee	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="25.00"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Gary Beamer</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 5601 Riverdale Avenue		<b>Transaction ID : SB23.6309</b>
City Bronx	State NY	
Purpose of Disbursement Reimbursement - Lodging	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="386.82"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Hertz Rental Car</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 333 Amherst Street		<b>Transaction ID : SB23.6309.2</b>
City Nashua	State NH	
Zip Code 03063	Purpose of Disbursement Rental Car	Amount of Each Disbursement this Period 260.21
Candidate Name	Category/ Type 101	<b>[MEMO ITEM]</b>
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:	

Full Name (Last, First, Middle Initial) <b>B. Troy Bishop</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 3500 SW 12th Place		<b>Transaction ID : SB23.6381</b>
City Des Moines	State IA	
Zip Code 50315	Purpose of Disbursement IA State Director Salary	Amount of Each Disbursement this Period 4712.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type 104	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

Full Name (Last, First, Middle Initial) <b>c. Bourcher Strategies</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 520 Folly Road		<b>Transaction ID : SB23.6292</b>
City Charleston	State SC	
Zip Code 29412	Purpose of Disbursement Phone Services	Amount of Each Disbursement this Period 1298.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type 103	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District: 00	

**Subtotal Of Receipts This Page** (optional)..... 6010.00

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

### A. Catch the Glory LLC

Mailing Address 48 Brook Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

City Manchester State NH Zip Code 03104

Transaction ID : SB23.6323

Purpose of Disbursement  
Rent

104
Category/ Type

Amount of Each Disbursement this Period

500.00
--------

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

### B. Catch the Glory LLC

Mailing Address 48 Brook Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	1	5

City Manchester State NH Zip Code 03104

Transaction ID : SB23.6340

Purpose of Disbursement  
Rent

104
Category/ Type

Amount of Each Disbursement this Period

500.00
--------

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

### C. Catch the Glory LLC

Mailing Address 48 Brook Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

City Manchester State NH Zip Code 03104

Transaction ID : SB23.6384

Purpose of Disbursement  
Rent

104
Category/ Type

Amount of Each Disbursement this Period

500.00
--------

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Subtotal Of Receipts This Page (optional)..... 

1500.00
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Total This Period (last page this line number only)..... 

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. CBlaney Group</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 300 East 85th Street		<b>Transaction ID : SB23.6367</b>
City New York	State NY	
Purpose of Disbursement Fundraising Consultant Fee	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="7000.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Club 101</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 101 Park Avenue		<b>Transaction ID : SB23.6341</b>
City New York	State NY	
Purpose of Disbursement Fundraising Meeting Expenses	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="478.88"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Lori Demichele</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 45 Lyons Road		<b>Transaction ID : SB23.6223</b>
City Scarsdale	State NY	
Purpose of Disbursement Reimbursement - Hotel Lodging	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="1803.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. The Exeter Inn**

Mailing Address 90 Front Street

City Exeter State NH Zip Code 03833

Purpose of Disbursement  
Lodging

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
08 / 28 / 2015

Transaction ID : SB23.6223.1

Amount of Each Disbursement this Period

1705.99
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Eifert, French & Ketchum**

Mailing Address 330 Fifth Avenue

City Pelham State NY Zip Code 10803

Purpose of Disbursement  
Insurance

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
08 / 23 / 2015

Transaction ID : SB23.6357

Amount of Each Disbursement this Period

2262.40
---------

Full Name (Last, First, Middle Initial)

**c. GuestBooker.com LLC**

Mailing Address 1204 Vintage Grove Lane

City Franklin State TN Zip Code 37064

Purpose of Disbursement  
Media Engagement Services

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
07 / 17 / 2015

Transaction ID : SB23.6319

Amount of Each Disbursement this Period

5000.00
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Subtotal Of Receipts This Page (optional)..... 7262.40

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 51 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

### A. GuestBooker.com LLC

Mailing Address 1204 Vintage Grove Lane

City Franklin State TN Zip Code 37064

Purpose of Disbursement  
Media Engagement Services

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	5

Transaction ID : SB23.6354

Amount of Each Disbursement this Period

5	0	0	0	0	.	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. Higher Level Group

Mailing Address 760 Dewdrop Loop

City Jacksonville State FL Zip Code 32259

Purpose of Disbursement  
Website Production & Management

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	5

Transaction ID : SB23.6267

Amount of Each Disbursement this Period

7	5	0	0	0	.	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. IDonate Pro

Mailing Address 2033 San Elijo Avenue  
#203

City Cardiff by the Sea State CA Zip Code 92007

Purpose of Disbursement  
Database Hosting Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	5

Transaction ID : SB23.6356

Amount of Each Disbursement this Period

4	5	0	0	0	.	0	0	0	0
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Subtotal Of Receipts This Page (optional).....

1	2	9	5	0	.	0	0	0	0
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Total This Period (last page this line number only).....

1	2	9	5	0	.	0	0	0	0
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. IRS**

Mailing Address Internal Revenue Service

City Kansas City State MO Zip Code 64999

Purpose of Disbursement  
Tax

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : SB23.6238

Amount of Each Disbursement this Period

5	2	3	8	.	7	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. J. Edgar Law, PLLC**

Mailing Address 24 David's Lane

City Pound Ridge State NY Zip Code 10576

Purpose of Disbursement  
Professional Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : SB23.6312

Amount of Each Disbursement this Period

6	0	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**C. J. Edgar Law, PLLC**

Mailing Address 24 David's Lane

City Pound Ridge State NY Zip Code 10576

Purpose of Disbursement  
Filing Fees

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	5

Transaction ID : SB23.6314

Amount of Each Disbursement this Period

9	4	3	.	0	0
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Subtotal Of Receipts This Page (optional)..... 12181.76

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. One Beacon Entertainment</b>		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 17 State Street		<b>Transaction ID : SB23.6314.0</b>
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Insurance	Amount of Each Disbursement this Period 255.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delaware Secretary of State</b>		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015
Mailing Address 1201 N Market Street #180		<b>Transaction ID : SB23.6314.1</b>
City Wilmington	State DE	
Zip Code 19801	Purpose of Disbursement Incorporation Fee	Amount of Each Disbursement this Period 589.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. JP Lexington LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 3614 165th Street		<b>Transaction ID : SB23.6326</b>
City Flushing	State NY	
Zip Code 11358	Purpose of Disbursement Compliance and Accounting Services	Amount of Each Disbursement this Period 6000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 6000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. JP Lexington LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 3614 165th Street		<b>Transaction ID : SB23.6328</b>
City Flushing	State NY	
Zip Code 11358	Purpose of Disbursement Printer	Amount of Each Disbursement this Period 217.71
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2015
Mailing Address 209-34 Northern Blvd		<b>Transaction ID : SB23.6328.0</b>
City Bayside	State NY	
Zip Code 11364	Purpose of Disbursement Printer	Amount of Each Disbursement this Period 217.71
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. JP Lexington LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 3614 165th Street		<b>Transaction ID : SB23.6339</b>
City Flushing	State NY	
Zip Code 11358	Purpose of Disbursement Compliance and Accounting Services	Amount of Each Disbursement this Period 4000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 4217.71

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. JP Lexington LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 3614 165th Street		<b>Transaction ID : SB23.6368</b>
City Flushing	State NY	
Zip Code 11358	Purpose of Disbursement Compliance and Accounting Services	Amount of Each Disbursement this Period 5000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6277</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Wages	Amount of Each Disbursement this Period 3000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6332</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 143.88
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 8143.88

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6332.0</b>
City New York	State NY	
Zip Code 10020	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 109.58
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6332.1</b>
City New York	State NY	
Zip Code 10020	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 24.50
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6332.2</b>
City New York	State NY	
Zip Code 10020	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 9.80
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6347</b>
City New York	State NY	
Purpose of Disbursement Wages	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="3000.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6348</b>
City New York	State NY	
Purpose of Disbursement Office Supplies	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2015
Mailing Address 675 3rd Avenue		<b>Transaction ID : SB23.6348.0</b>
City New York	State NY	
Purpose of Disbursement Printer Ink	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="100.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6369</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Wages	Amount of Each Disbursement this Period 3000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Philip Junquera</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 930 Park Avenue		<b>Transaction ID : SB23.6370</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Reimbursement - Travel Expenses	Amount of Each Disbursement this Period 775.26
Candidate Name	Category/ Type 101	
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:		

Full Name (Last, First, Middle Initial) <b>c. Hampton Inn NH</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 580 Meadow Street		<b>Transaction ID : SB23.6370.4</b>
City Littleton	State NH	
Zip Code 03561	Purpose of Disbursement Lodging	Amount of Each Disbursement this Period 227.81
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 3775.26

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Dial 7 Car Service</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2015
Mailing Address 43-23 35th Street		<b>Transaction ID : SB23.6370.5</b>
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement Car Service	Amount of Each Disbursement this Period 324.25
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Peter Kelly</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 335 W.19th St. Apt. A9		<b>Transaction ID : SB23.6311</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Reimbursement - Lodging	Amount of Each Disbursement this Period 301.46
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Elrac LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 15 Tarrytown Road		<b>Transaction ID : SB23.6311.0</b>
City White Plains	State NY	
Zip Code 10607	Purpose of Disbursement Car Service	Amount of Each Disbursement this Period 301.46
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 301.46

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Randy Lavoie</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 29 Rambling Rose Drive		<b>Transaction ID : SB23.6275</b>
City Manchester	State NE	
Purpose of Disbursement Rent	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 2500.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Randy Lavoie</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 29 Rambling Rose Drive		<b>Transaction ID : SB23.6331</b>
City Manchester	State NE	
Purpose of Disbursement Rent	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 2500.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Randy Lavoie</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2015
Mailing Address 29 Rambling Rose Drive		<b>Transaction ID : SB23.6364</b>
City Manchester	State NE	
Purpose of Disbursement Rent	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 2500.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 7500.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Lacy Lynch</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 5301 Miramar Ln		<b>Transaction ID : SB23.6269</b>
City Colleyville	State TX	
Purpose of Disbursement Consulting Fee for Brand & On Line		Amount of Each Disbursement this Period 3800.00
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. NYS Tax &amp; Finance</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 11 Pennsylvania Plaza		<b>Transaction ID : SB23.6236</b>
City New York	State NY	
Purpose of Disbursement Tax		Amount of Each Disbursement this Period 969.09
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Pagones-O'Neill Security</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2015
Mailing Address 355 Main Street		<b>Transaction ID : SB23.6359</b>
City Beacon	State NY	
Purpose of Disbursement Security Services		Amount of Each Disbursement this Period 3122.35
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type 101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 7891.44

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Pagonos-O'Neill Security</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2015
Mailing Address 355 Main Street		<b>Transaction ID : SB23.6361</b>
City Beacon	State NY	
Zip Code 12508	Purpose of Disbursement Security Services	Amount of Each Disbursement this Period 5545.86
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Pagonos-O'Neill Security</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 355 Main Street		<b>Transaction ID : SB23.6383</b>
City Beacon	State NY	
Zip Code 12508	Purpose of Disbursement Security Services	Amount of Each Disbursement this Period 4152.93
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. George Pataki</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 1301 6th Avenue 24th Floor		<b>Transaction ID : SB23.6378</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Reimbursement - Travel Expenses	Amount of Each Disbursement this Period 13441.57
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 23140.36

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 8000 Essington Avenue

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement  
Airfare

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

**Transaction ID : SB23.6378.0**

Amount of Each Disbursement this Period

									250.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 8000 Essington Avenue

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement  
Airfare

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**Transaction ID : SB23.6378.1**

Amount of Each Disbursement this Period

									416.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Airfare

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**Transaction ID : SB23.6378.3**

Amount of Each Disbursement this Period

									821.10

[MEMO ITEM]

**Subtotal Of Receipts This Page** (optional)..... 

									0.00
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**Total This Period** (last page this line number only)..... 

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.4</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="365.10"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.5</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="365.10"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.6</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="730.20"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional).....

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6378.8</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	Category/Type 101	Amount of Each Disbursement this Period 250.10
Candidate Name PATAKI FOR PRESIDENT INC	[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.9</b>
City Atlanta	State GA Zip Code 30320	
Purpose of Disbursement Baggage Fee	Category/Type 101	Amount of Each Disbursement this Period 35.00
Candidate Name PATAKI FOR PRESIDENT INC	[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6378.10</b>
City Chicago	State IL Zip Code 60606	
Purpose of Disbursement Airfare	Category/Type 101	Amount of Each Disbursement this Period 573.10
Candidate Name PATAKI FOR PRESIDENT INC	[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6378.11</b>
City Chicago	State IL Zip Code 60606	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="573.10"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Protravel International</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.12</b>
City New York	State NY Zip Code 10022	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="573.10"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Protravel International</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.13</b>
City New York	State NY Zip Code 10022	
Purpose of Disbursement Agency Fee	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="45.00"/>
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.14</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 538.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6378.15</b>
City Philadelphia	State PA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 630.20
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.16</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 538.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6378.17</b>
City Chicago	State IL Zip Code 60606	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 538.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.18</b>
City Atlanta	State GA Zip Code 30320	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 538.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Protravel International</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.19</b>
City New York	State NY Zip Code 10022	
Purpose of Disbursement Agency Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 45.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Protravel International</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.20</b>
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Agency Fee	Amount of Each Disbursement this Period 45.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Protravel International</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.21</b>
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Agency Fee	Amount of Each Disbursement this Period 45.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6378.22</b>
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 673.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Des Moines Marriott</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 700 Grand Avenue		<b>Transaction ID : SB23.6378.24</b>
City Des Moines	State IA	
Purpose of Disbursement Lodging	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 204.48
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.25</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 955.20
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.26</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 777.70
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Protravel International</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.27</b>
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Agency Fee	Amount of Each Disbursement this Period 90.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.28</b>
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 638.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Protravel International</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 515 Madison Avenue		<b>Transaction ID : SB23.6378.30</b>
City New York	State NY	
Zip Code 10022	Purpose of Disbursement Agency Fee	Amount of Each Disbursement this Period 25.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. JetBlue Airways**

Mailing Address 27-01 Queens Plaza

City Long Island City State NY Zip Code 11101

Purpose of Disbursement  
Airfare

**101**

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	5

**Transaction ID : SB23.6378.31**

Amount of Each Disbursement this Period

2	7	1	.	1	0
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 8000 Essington Avenue

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement  
Airfare

**101**

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	5

**Transaction ID : SB23.6378.32**

Amount of Each Disbursement this Period

2	5	0	.	1	0
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**c. US Airways**

Mailing Address 8000 Essington Avenue

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement  
Airfare

**101**

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	5

**Transaction ID : SB23.6378.33**

Amount of Each Disbursement this Period

4	1	6	.	1	0
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**[MEMO ITEM]**

**Subtotal Of Receipts This Page** (optional)..... 

0	0	0	.	0	0
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**Total This Period** (last page this line number only)..... 

0	0	0	.	0	0
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6378.35</b>
City Atlanta	State GA	
Zip Code 30320	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 821.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Pataki Cahill Group</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 301 6th Avenue 24th Floor		<b>Transaction ID : SB23.6335</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Reimbursement - Travel Expenses	Amount of Each Disbursement this Period 4690.03
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.0</b>
City Philadelphia	State PA	
Zip Code 19153	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 365.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 4690.03

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.1</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="228.10"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.2</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="416.10"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.4</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="365.10"/>
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6335.7</b>
City Chicago	State IL	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 366.20
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 4333 Amon Carter Blvd		<b>Transaction ID : SB23.6335.9</b>
City Fort Worth	State TX	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 331.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address PO Box 20706		<b>Transaction ID : SB23.6335.10</b>
City Atlanta	State GA	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 450.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address 233 South Wacker Drive		<b>Transaction ID : SB23.6335.12</b>
City Chicago	State IL Zip Code 60606	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 820.10
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement MM / DD / YYYY 07 / 06 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.13</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 370.30
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 8000 Essington Avenue		<b>Transaction ID : SB23.6335.15</b>
City Philadelphia	State PA Zip Code 19153	
Purpose of Disbursement Airfare	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 527.14
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

23  24  25  26  27a  
 27b  28a  28b  28c  29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

**A. PSB Group**

Full Name (Last, First, Middle Initial): PATAKI FOR PRESIDENT INC

Mailing Address: 1838 Second Avenue Suite234

City: New York State: NY Zip Code: 10128

Purpose of Disbursement: Campaign Manager Salary

Candidate Name: PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: MM / DD / YYYY **07 / 02 / 2015**

**Transaction ID : SB23.6270**

Amount of Each Disbursement this Period: **11875.00**

Category/Type: **101**

**B. PSB Group**

Full Name (Last, First, Middle Initial): PATAKI FOR PRESIDENT INC

Mailing Address: 1838 Second Avenue Suite234

City: New York State: NY Zip Code: 10128

Purpose of Disbursement: Office Computer & Signs

Candidate Name: PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: MM / DD / YYYY **07 / 02 / 2015**

**Transaction ID : SB23.6272**

Amount of Each Disbursement this Period: **828.30**

Category/Type: **101**

**c. Staples**

Full Name (Last, First, Middle Initial): PATAKI FOR PRESIDENT INC

Mailing Address: 209-34 Northern Blvd

City: Bayside State: NY Zip Code: 11364

Purpose of Disbursement: Office Computer

Candidate Name: PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: MM / DD / YYYY **06 / 09 / 2015**

**Transaction ID : SB23.6272.0**

Amount of Each Disbursement this Period: **435.49**

Category/Type: **101**

**[MEMO ITEM]**

Subtotal Of Receipts This Page (optional)..... **12703.30**

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. Talient**

Mailing Address 105 Faltin Drive

City Manchester State NH Zip Code 03103

Purpose of Disbursement  
Rally Signs

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	5

Transaction ID : SB23.6272.1

Amount of Each Disbursement this Period

3	9	2	.	8	1
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PSB Group**

Mailing Address 1838 Second Avenue  
Suite234

City New York State NY Zip Code 10128

Purpose of Disbursement  
Airfare & Lodging

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	5

Transaction ID : SB23.6286

Amount of Each Disbursement this Period

4	2	8	3	.	3	6
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Full Name (Last, First, Middle Initial)

**C. PMV Limousine**

Mailing Address 10 Hendrick Hills

City Peekskill State NY Zip Code 10566

Purpose of Disbursement  
Car Service

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	5

Transaction ID : SB23.6286.0

Amount of Each Disbursement this Period

8	7	6	.	3	1
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[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 4283.36

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 4333 Amon Carter Blvd		<b>Transaction ID : SB23.6286.1</b>
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 1341.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. New York Hilton</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address 1335 Avenue of the Americas		<b>Transaction ID : SB23.6286.2</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	Amount of Each Disbursement this Period 769.33
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Fedex</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2015
Mailing Address 1211 Avenue of the Americas		<b>Transaction ID : SB23.6286.3</b>
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 884.82
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 07 / 08 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6286.4</b>
City New York	State NY	
Zip Code 10020	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 171.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Wholesale Copies</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address 1 East 28th Street		<b>Transaction ID : SB23.6286.5</b>
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Printing	Amount of Each Disbursement this Period 240.90
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. PSB Group</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 1838 Second Avenue Suite234		<b>Transaction ID : SB23.6287</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Campaign Manager Salary	Amount of Each Disbursement this Period 12000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 12000.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. PSB Group</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 1838 Second Avenue Suite234		<b>Transaction ID : SB23.6288</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Postage & Lodging	Amount of Each Disbursement this Period 564.69
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Fedex</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 1211 Avenue of the Americas		<b>Transaction ID : SB23.6288.2</b>
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Postage	Amount of Each Disbursement this Period 434.77
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. PSB Group</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 1838 Second Avenue Suite234		<b>Transaction ID : SB23.6291</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Travel & Office Expenses	Amount of Each Disbursement this Period 6065.46
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 6630.15

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Hilton Hotel</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address 1335 Avenue of the Americas		<b>Transaction ID : SB23.6291.0</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	Amount of Each Disbursement this Period 2307.22
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Wholesale Copies</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 1 East 28th Street		<b>Transaction ID : SB23.6291.1</b>
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Printing Stationary	Amount of Each Disbursement this Period 2840.55
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Talient</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address 105 Faltin Drive		<b>Transaction ID : SB23.6291.2</b>
City Manchester	State NH	
Zip Code 03103	Purpose of Disbursement Printing Business Cards	Amount of Each Disbursement this Period 617.90
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 07 / 28 / 2015
Mailing Address 27-55 Jackson Avenue		<b>Transaction ID : SB23.6291.3</b>
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement Car Service	Amount of Each Disbursement this Period 299.79
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. PSB Group</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1838 Second Avenue Suite234		<b>Transaction ID : SB23.6295</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Campaign Manager Salary	Amount of Each Disbursement this Period 12000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. PSB Group</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 1838 Second Avenue Suite234		<b>Transaction ID : SB23.6296</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Palm Cards & Meida Website	Amount of Each Disbursement this Period 1667.78
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 13667.78

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. Talient**

Mailing Address 105 Faltin Drive

City Manchester State NH Zip Code 03103

Purpose of Disbursement  
Palm Cards

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	5

Transaction ID : SB23.6296.0

Amount of Each Disbursement this Period

1	3	6	7	.	8	1
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Bultman Media Website**

Mailing Address Information Requested

City Jacksonville State FL Zip Code 32204

Purpose of Disbursement  
Website Fee

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

Transaction ID : SB23.6296.1

Amount of Each Disbursement this Period

2	9	9	.	9	7
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PSB Group**

Mailing Address 1838 Second Avenue  
Suite234

City New York State NY Zip Code 10128

Purpose of Disbursement  
Office Expenses

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	5

Transaction ID : SB23.6301

Amount of Each Disbursement this Period

1	6	2	6	.	5	4
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Subtotal Of Receipts This Page (optional).....

1	6	2	6	.	5	4
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Total This Period (last page this line number only).....

1	6	2	6	.	5	4
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. National Car Rental</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 9020 Aviation Blvd		<b>Transaction ID : SB23.6301.0</b>
City Los Angeles	State CA Zip Code 90301	
Purpose of Disbursement Car Rental	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 175.88
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Courtyard Marriott</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 191 Cochran Street		<b>Transaction ID : SB23.6301.1</b>
City Simi Valley	State CA Zip Code 93065	
Purpose of Disbursement Lodging	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 256.96
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2015
Mailing Address 1701JFK Blvd		<b>Transaction ID : SB23.6301.3</b>
City Philadelphia	State PA Zip Code 19103	
Purpose of Disbursement Cable Services	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 1104.40
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. South Carolina Republican Party</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 1913 Marion St.		<b>Transaction ID : SB23.6302</b>
City Columbia	State SC	
Purpose of Disbursement SC Ballot	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 40000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. State Insurance Fund</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 199 Church Street		<b>Transaction ID : SB23.6321</b>
City New York	State NY	
Purpose of Disbursement Insurance	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 454.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. State Insurance Fund</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 199 Church Street		<b>Transaction ID : SB23.6380</b>
City New York	State NY	
Purpose of Disbursement Insurance	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 454.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 40908.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Adrienne Sutton</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 325 East 41st Street		<b>Transaction ID : SB23.6278</b>
City New York	State NY	
Purpose of Disbursement Campaign Staff Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 5000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Adrienne Sutton</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 325 East 41st Street		<b>Transaction ID : SB23.6344</b>
City New York	State NY	
Purpose of Disbursement Campaign Staff Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 5000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Adrienne Sutton</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 325 East 41st Street		<b>Transaction ID : SB23.6371</b>
City New York	State NY	
Purpose of Disbursement Campaign Staff Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 5000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 15000.00

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. The Preston Group</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 25 Tuttle Avenue		<b>Transaction ID : SB23.6283</b>
City Hampton	State NH	
Purpose of Disbursement NH Communications Consultant Salary	Category/ Type <b>104</b>	Amount of Each Disbursement this Period 10000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. The Preston Group</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 25 Tuttle Avenue		<b>Transaction ID : SB23.6285</b>
City Hampton	State NH	
Purpose of Disbursement Reimbursement - Office Furniture and Supplies	Category/ Type <b>104</b>	Amount of Each Disbursement this Period 1741.45
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Jack the Liquidator</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 291 Shasta Street		<b>Transaction ID : SB23.6285.0</b>
City Manchester	State NH	
Purpose of Disbursement Office Furniture	Category/ Type <b>104</b>	Amount of Each Disbursement this Period 240.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 11741.45

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Belknap County Republican Committee</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2015
Mailing Address 88 Ladd Hill Road		<b>Transaction ID : SB23.6285.2</b>
City Belmont	State NH	
Zip Code 03246	Purpose of Disbursement Ticket Price	Amount of Each Disbursement this Period 250.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 104	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Hagan's Grill</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2015
Mailing Address 6 High Street		<b>Transaction ID : SB23.6285.6</b>
City Hampton	State NH	
Zip Code 03842	Purpose of Disbursement Meeting Expense	Amount of Each Disbursement this Period 408.39
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 104	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Popovers on the Square</b>		Date of Disbursement MM / DD / YYYY 06 / 04 / 2015
Mailing Address 8 Congress Street		<b>Transaction ID : SB23.6285.7</b>
City Portsmouth	State NH	
Zip Code 03801	Purpose of Disbursement Rally Food	Amount of Each Disbursement this Period 244.39
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 104	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Cheers</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2015
Mailing Address 17 Depot Street		<b>Transaction ID : SB23.6285.8</b>
City Concord	State NH	
Zip Code 03301	Purpose of Disbursement Reception Expenses	Amount of Each Disbursement this Period 212.95
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 104	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. The Preston Group</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 25 Tuttle Avenue		<b>Transaction ID : SB23.6351</b>
City Hampton	State NH	
Zip Code 03842	Purpose of Disbursement NH Communications Consultant Salary	Amount of Each Disbursement this Period 10000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 104	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. The Preston Group</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 25 Tuttle Avenue		<b>Transaction ID : SB23.6386</b>
City Hampton	State NH	
Zip Code 03842	Purpose of Disbursement Meeting Expenses	Amount of Each Disbursement this Period 841.63
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 10841.63

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 91 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Fratellos</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2015
Mailing Address 155 Dow Street		<b>Transaction ID : SB23.6386.1</b>
City Manchester	State NH	
Purpose of Disbursement Meeting Expense	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 314.11
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Number 5 Tavern</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 157 Main Street		<b>Transaction ID : SB23.6386.2</b>
City Hopkinton	State NH	
Purpose of Disbursement Meeting Expense	<input type="checkbox"/> 104	Amount of Each Disbursement this Period 287.74
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Through the Woods</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 32322 Saddle Mountain Dr.		<b>Transaction ID : SB23.6317</b>
City Westlake Village	State CA	
Purpose of Disbursement Video Editing	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 750.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. Through the Woods**

Mailing Address 32322 Saddle Mountain Dr.

City State Zip Code  
Westlake Village CA 91361

Purpose of Disbursement  
Video Editing Services

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SB23.6353

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Mr. Kevin Tschirhart**

Mailing Address 3 Drake Place

City State Zip Code  
Northport NY 11768

Purpose of Disbursement  
Expense Reimbursement

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2015

Transaction ID : SB23.6273

Amount of Each Disbursement this Period

1811.70
---------

Full Name (Last, First, Middle Initial)

**c. Staples**

Mailing Address 675 3rd Avenue

City State Zip Code  
New York NY 10017

Purpose of Disbursement  
Copies

101

Candidate Name  
PATAKI FOR PRESIDENT INC

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2015

Transaction ID : SB23.6273.2

Amount of Each Disbursement this Period

501.47
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 2811.70

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 675 3rd Avenue

City New York State NY Zip Code 10017

Purpose of Disbursement  
Office Supplies

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

Transaction ID : SB23.6273.4

Amount of Each Disbursement this Period

93.10
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Vertical Response**

Mailing Address 502 Beale Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Email Listing

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2015

Transaction ID : SB23.6273.8

Amount of Each Disbursement this Period

260.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address Rockefeller Center Station

City New York State NY Zip Code 10020

Purpose of Disbursement  
Postage

101

Candidate Name  
**PATAKI FOR PRESIDENT INC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.6273.10

Amount of Each Disbursement this Period

276.09
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 06 / 09 / 2015
Mailing Address 675 3rd Avenue		<b>Transaction ID : SB23.6273.11</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Office Supplies	Amount of Each Disbursement this Period 9,999.99 45.17
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Vertical Response</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 502 Beale Street		<b>Transaction ID : SB23.6273.14</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Email List	Amount of Each Disbursement this Period 9,999.99 150.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6280</b>
City Northport	State NY	
Zip Code 11768	Purpose of Disbursement Campaign Deputy Manager Salary	Amount of Each Disbursement this Period 9,999.99 9000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 9000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6289</b>
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Campaign Deputy Manager Salary	Category/Type <b>101</b>	Amount of Each Disbursement this Period 9000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6290</b>
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Reimbursement - Travel Expenses	Category/Type <b>101</b>	Amount of Each Disbursement this Period 1015.71
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mariott Downtown</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2015
Mailing Address 7200 Grand Avenue		<b>Transaction ID : SB23.6290.2</b>
City Des Moines	State IA Zip Code 50309	
Purpose of Disbursement Lodging	Category/Type <b>101</b>	Amount of Each Disbursement this Period 500.46
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 10015.71

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 96 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6297</b>
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Deputy Campaign Manager Salary	Category/Type <b>101</b>	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6298</b>
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Reimbursement - Office Expenses	Category/Type <b>101</b>	Amount of Each Disbursement this Period 859.35
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>c. Hertz Rental Car</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 333 Amherst Street		<b>Transaction ID : SB23.6298.3</b>
City Nashua	State NH Zip Code 03063	
Purpose of Disbursement Car Rental	Category/Type <b>101</b>	Amount of Each Disbursement this Period 139.36
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Subtotal Of Receipts This Page (optional)..... **5859.35**

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 97 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Downtown Marriott</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2015
Mailing Address 700 Grand Avenue		<b>Transaction ID : SB23.6298.10</b>
City Des Moines	State IA	
Purpose of Disbursement Lodging	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 227.39
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Vertical Response</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 502 Beale Street		<b>Transaction ID : SB23.6298.11</b>
City San Francisco	State CA	
Purpose of Disbursement Email List	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 162.94
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Kevin Tschirhart</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 3 Drake Place		<b>Transaction ID : SB23.6299</b>
City Northport	State NY	
Purpose of Disbursement Deputy Campaign Manager Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 4000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 4000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6281</b>
City Port Washington	State NY	
Zip Code 11050	Purpose of Disbursement Campaign Staff Salary	Amount of Each Disbursement this Period 4000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6346</b>
City Port Washington	State NY	
Zip Code 11050	Purpose of Disbursement Reimbursement - Office Supplies	Amount of Each Disbursement this Period 584.86
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6346.0</b>
City New York	State NY	
Zip Code 10020	Purpose of Disbursement PO Box Fee	Amount of Each Disbursement this Period 493.04
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type 101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 4584.86

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 107

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Staples</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>02</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		02		2015
M M	/	D D	/	Y Y Y Y									
07		02		2015									
Mailing Address 675 3rd Avenue		<b>Transaction ID : SB23.6346.1</b>											
City	State	Zip Code	<b>Amount of Each Disbursement this Period</b>										
New York	NY	10017											
Purpose of Disbursement Office Supplies		<b>101</b>	<table border="1"> <tr> <td>36.83</td> </tr> </table>	36.83									
36.83													
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State:	District: 00												

[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>02</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		02		2015
M M	/	D D	/	Y Y Y Y									
07		02		2015									
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6346.2</b>											
City	State	Zip Code	<b>Amount of Each Disbursement this Period</b>										
New York	NY	10020											
Purpose of Disbursement Postage		<b>101</b>	<table border="1"> <tr> <td>8.97</td> </tr> </table>	8.97									
8.97													
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State:	District: 00												

[MEMO ITEM]

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>c. Fedex</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>15</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		15		2015
M M	/	D D	/	Y Y Y Y									
07		15		2015									
Mailing Address 1211 Avenue of the Americas		<b>Transaction ID : SB23.6346.4</b>											
City	State	Zip Code	<b>Amount of Each Disbursement this Period</b>										
New York	NY	10036											
Purpose of Disbursement Postage		<b>101</b>	<table border="1"> <tr> <td>21.52</td> </tr> </table>	21.52									
21.52													
Candidate Name PATAKI FOR PRESIDENT INC		Category/ Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State:	District: 00												

[MEMO ITEM]

**Subtotal Of Receipts This Page** (optional)..... 

0.00
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**Total This Period** (last page this line number only)..... 

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6349</b>
City Port Washington	State NY	
Purpose of Disbursement Campaign Staff Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 4000.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6355</b>
City Port Washington	State NY	
Purpose of Disbursement Postage	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 49.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address Rockefeller Center Station		<b>Transaction ID : SB23.6355.0</b>
City New York	State NY	
Purpose of Disbursement Stamps	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 49.00
Candidate Name PATAKI FOR PRESIDENT INC	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 4049.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6372</b>
City Port Washington	State NY	
Purpose of Disbursement Email List	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 255.44
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Vertical Response</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 502 Beale Street		<b>Transaction ID : SB23.6372.0</b>
City San Francisco	State CA	
Purpose of Disbursement Email List	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 255.44
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Mr. Matt Varvaro</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 80 Soundview Dr.		<b>Transaction ID : SB23.6388</b>
City Port Washington	State NY	
Purpose of Disbursement Campaign Staff Salary	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 4000.00
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 4255.44

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

**A. Verizon Wireless**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 408

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Cell & Data

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 12 / 2015

**Transaction ID : SB23.6259**

Amount of Each Disbursement this Period  
669.43

Category/Type: 101

**B. Verus LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 Park Avenue

City New York State NY Zip Code 10178

Purpose of Disbursement  
Communications Consultant Fee

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
09 / 04 / 2015

**Transaction ID : SB23.6376**

Amount of Each Disbursement this Period  
12000.00

Category/Type: 101

**c. Widget Makr**

Full Name (Last, First, Middle Initial)  
Mailing Address 1593 Spring Hill Road  
Suite 400

City Tyson Corner State VA Zip Code 22182

Purpose of Disbursement  
Merchant Processing Fee

Candidate Name  
PATAKI FOR PRESIDENT INC

Office Sought:  House  Senate  President  
State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
07 / 03 / 2015

**Transaction ID : SB23.6229**

Amount of Each Disbursement this Period  
1239.15

Category/Type: 101

**Subtotal Of Receipts This Page** (optional)..... 13908.58

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6235</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 89.84
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6241</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 18.85
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>c. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6243</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 294.07
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**Subtotal Of Receipts This Page** (optional)..... 402.76

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6246</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 15.70
Candidate Name PATAKI FOR PRESIDENT INC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6248</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 153.16
Candidate Name PATAKI FOR PRESIDENT INC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>c. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6251</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	Amount of Each Disbursement this Period 236.64
Candidate Name PATAKI FOR PRESIDENT INC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**Subtotal Of Receipts This Page** (optional)..... 405.50

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6252</b>
City Tyson Corner State VA Zip Code 22182	Amount of Each Disbursement this Period 255.84	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	
Candidate Name PATAKI FOR PRESIDENT INC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6254</b>
City Tyson Corner State VA Zip Code 22182	Amount of Each Disbursement this Period 143.32	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	
Candidate Name PATAKI FOR PRESIDENT INC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6256</b>
City Tyson Corner State VA Zip Code 22182	Amount of Each Disbursement this Period 284.15	
Purpose of Disbursement Merchant Processing Fee	Category/ Type 101	
Candidate Name PATAKI FOR PRESIDENT INC		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

**Subtotal Of Receipts This Page** (optional)..... 683.31

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Full Name (Last, First, Middle Initial) <b>A. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6258</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 49.25
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>B. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6261</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 7.61
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Full Name (Last, First, Middle Initial) <b>c. Widget Makr</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.6262</b>
City Tyson Corner	State VA Zip Code 22182	
Purpose of Disbursement Merchant Processing Fee	<input type="checkbox"/> 101	Amount of Each Disbursement this Period 220.03
Candidate Name <b>PATAKI FOR PRESIDENT INC</b>	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00		

Subtotal Of Receipts This Page (optional)..... 276.89

Total This Period (last page this line number only)..... 347216.22

# SCHEDULE C-P LOANS

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

FOR LINE NUMBER:  19a  19b  
(check only one)

NAME OF COMMITTEE (In Full)  
**PATAKI FOR PRESIDENT INC**

Transaction ID : **SC/12.6387**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Mr. George Pataki

**[PERSONAL FUNDS]**

Election: 2016

- Primary
- General
- Other (specify) ▼

Mailing Address  
1301 6th Avenue  
24th Floor

City	State	ZIP Code
New York	NY	10019

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 29 / Y 2015	M / D / Y 11/1/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**Subtotal Of Receipts This Page** (optional).....▶

**Total This Period** (last page this line number only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.