REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECT
COMMISSION
MAIL ROOM
OCT 7 12 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Community Bankers Assn of New York State Political Action Cmte

ADDRESS (number and street) ☐ Check if different than previously reported
P.O. Box 325 - Grand Central Stat.

CITY, STATE and ZIP CODE
New York, N.Y. 10164

2. FEC IDENTIFICATION NUMBER
C00098301

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☒ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7/1/96 through 9/30/96		$ 74,601.87
6. (a) Cash on Hand January 1, 19 96	$ 74,977.03	
(b) Cash on Hand at Beginning of Reporting Period	$ 2,064.58	$ 19,264.74
(c) Total Receipts (from Line 19)	$ 77,041.61	$ 93,866.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 7800.00	$ 24,625.00
7. Total Disbursements (from Line 30)	$ 69,241.61	$ 69,241.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: PHILIP S. MESSINA

Date

Signature of Treasurer: Philip S. Messina

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

FEC FORM 3X
(revised 9/93)

3-00173

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Community Bankers Assn of N.Y.S. PAC

REPORT COVERING PERIOD FROM 7/1/96 TO: 9/30/96

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	200.00	2400.00	11(a)(i)
ii. Unitemized	160.00	13,864.00	11(a)(ii)
iii. Total (add i and ii) ➤	360.00	16,264.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	1500.00	2500.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	1860.00	18,764.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.) INTEREST	204.58	500.74	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2064.58	19,264.74	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	2064.58		20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			22
22. Transfers to Affiliated/Other Party Committees	7800.00	24625.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			28(a)
28. Refunds of Contributions To:			28(b)
a. Individuals/Persons Other Than Political Committees			28(c)
b. Political Party Committees			28(d)
c. Other Political Committees (such as PACs)			29
d. Total Contribution Refunds (add a, b and c) ➤			30
29. Other Disbursements	7800.00	24625.00	31
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	7800.00	24625.00	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FEBAN066

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11A7

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): Community Bankers Assn of N.Y.S. PAC

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code: Monte Redman, 69 Third Street, Garden City, N.Y. 11530	Name of Employer: Astoria Federal Sil; Occupation: Bank Exec	8/20/96	200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $ 200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) 200.00

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11 C

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NAME OF COMMITTEE (In Full): Community Bankers Assn of N.Y.S PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Savings Bank of Utica PAC, 233 Genesee Street, Utica, N.Y. 13501	PAC	8/20/96	1500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 1500.00

FEAN066

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Community Bankers Assn of New York State Political Action Cmte

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. APPLE BANK, 666 Third Avenue, NYC NY 10017		6/19/96	74.16
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Interest	Aggregate Year-to-Date $ 370.32		
B. APPLE BANK, 666 Third Avenue, NYC, NY 10017		7/17/96	58.69
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Interest	Aggregate Year-to-Date $ 429.01		
C. APPLE BANK, 666 Third Avenue, NYC NY 10017		8/21/96	71.73
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Interest	Aggregate Year-to-Date $ 500.74		
D.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
E.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G.			
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) $204.58

#ESAH068

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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): Community Bankers Assn of New York State Political Action Cmte.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Charles Rangel Victory Fund, 920 Broadway, NYC NY 10010	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	7/12/96	$1000
B. Empire Majority Leadership, P.O. Box 456, Washington D.C. 20044	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	7/12/96	$1000
C. Friends of Mike Forbes, P.O. Box 505, Farmingville, L.I. 11738	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	7/16/96	$500
D. Friends of John LaFalce, P.O. Box 2884, Washington, D.C. 20013	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	7/24/96	$500
E. Sue Kelly '96, 2555 Pennsylvania, N.W., Washington, D.C. 20037	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	8/16/96	$500
F. Quinn For Congress, P.O. Box 2012, Bisdell, N.Y. 11429	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	9/3/96	$500
G. Ackerman For Congress, P.O. Box 95, Fresh Meadow, N.Y. 11365	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	9/10/96	$500
H. Friends of Sherwood Boehlert, 1212 N. Vernon Street, Arlington, VA 22201	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	9/10/96	$500
I. Manton For Congress, 46-12 Queens Blvd, Sunnyside, NY	Contribution; Disbursement for: Primary [X] General [ ] Other (specify)	9/10/96	$500

SUBTOTAL of Disbursements This Page (optional) $5500.00

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

FEBAN066

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 2
	FOR LINE NUMBER 23

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Community Bankers Assn of New York State Political Act Cmte

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Walsh For Congress PO Box 1974 Syracuse, NY 13201	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/10/96	$300
B. Full Name, Mailing Address and ZIP Code Friends of Houghton 4451 Brookfield Corp. Dr. Chantilly, VA 20151	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/10/96	$500
C. Full Name, Mailing Address and ZIP Code Pete King For Congress P.O. Box 1428 Seaford, N.Y. 11783	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/16/96	$500
D. Full Name, Mailing Address and ZIP Code Paxon For Congress 19 Maple Street Victor, N.Y. 14564	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/11/96	$1000
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$2300.00
TOTAL This Period (last page this line number only)	$7,800.00

FE8AN086

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 10-3-96
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER: [illegible]

DATE PREPARED: 10-7-96

FEC FORM 70-2 (12/92)