

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
New York State Democratic Committee

ADDRESS (number and street) 461 Park Avenue South, 10th Floor  
 Check if different than previously reported. (ACC)  
New York NY 10016

2. **FEC IDENTIFICATION NUMBER** C00143230  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of NY

5. Covering Period 10 14 2010 through 11 22 2010

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 David Alpert

Signature of Treasurer Electronically Filed by David Alpert Date 12 02 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Please be advised that the wages reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and, as such, these wages can be paid as administrative expenses. Fringe benefits may continue to be reported on Schedule H4.

A. Form/Schedule : **F3XN**

Transaction ID :

Please note that the aggregate year-to-date amounts of receipts from PACs on Line 17 are combined receipts for the 25th CD general election and recount for Friends of Dan Maffei.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		32912.17
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	657643.12									
(c) Total Receipts (from Line 19) .....	1561405.09	4958999.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2219048.21	4991911.35								
7. Total Disbursements (from Line 31) .....	2045962.97	4826802.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	173085.24	165108.55								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	25188.41									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
New York State Democratic Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	69100.00	303950.00
(ii) Unitemized .....	2120.00	4845.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	71220.00	308795.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	50750.00	427750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	121970.00	736545.00
12. Transfers From Affiliated/Other Party Committees .....	1210707.68	3035041.83
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	14809.36	112288.66
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	16700.00	213307.10
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	197218.05	861816.59
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	197218.05	861816.59
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1561405.09	4958999.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1364187.04	4097182.59

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	63337.85	279890.54
(ii) Non-Federal Share.....	238270.79	925555.00
(b) Other Federal Operating Expenditures.....	24219.77	90750.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	325828.41	1296195.63
22. Transfers to Affiliated/Other Party Committees.....	114273.17	114273.17
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	5398.60
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	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 (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	21700.00	74100.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	1584161.39	3336835.40
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	1584161.39	3336835.40
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2045962.97	4826802.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1807692.18	3901247.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	121970.00	736545.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	121970.00	736545.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	87557.62	370640.63
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	14809.36	112288.66
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	72748.26	258351.97

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 284  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
New York State Democratic Committee

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

Mailing Address 1320 East 9th Street

City State Zip Code  
Brooklyn NY 11230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Brooklyn Amity School Asst. Building Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

**Transaction ID:** C3173002

Amount of Each Receipt this Period 1750.00

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

Mailing Address 4210 Bostonian Drive

City State Zip Code  
Guilderland NY 12306

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
New York State Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** C3173009

Amount of Each Receipt this Period 250.00

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

Mailing Address 3 Plateau Circle E

City State Zip Code  
Bronxville NY 10708

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Bernstein, Litowitz, Berg-er et al Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**Transaction ID:** C3166245

Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 7000.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 284  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 4 Clinton Square

City State Zip Code  
Syracuse NY 13202

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

Name of Employer Occupation  
Pyramid Management Group Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**Transaction ID:** C3176024

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 29 East 64th Street PH

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Boies, Schiller & Flexner LLP Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

**Transaction ID:** C3166538

Amount of Each Receipt this Period  
10000.00

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

Mailing Address 2 Stanley Hollow Rd.

City State Zip Code  
Chappaqua NY 10514

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

Name of Employer Occupation  
Law Firm of Kasowitz, Benson, Torres, Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** C3176336

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Francis Greenburger

Mailing Address 55 5th Ave  
Fl 15

City State Zip Code  
New York NY 10003-4301

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

Name of Employer Occupation  
Time Equities, Inc. Real Estate Developer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 8500.00

Date of Receipt

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

Transaction ID: C3166939

Amount of Each Receipt this Period

1000.00
---------

**B.**

Full Name (Last, First, Middle Initial)  
Edward Hartzog

Mailing Address 420 E. 64th Street, Apt. E4C

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Information Requested Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C3172984

Amount of Each Receipt this Period

125.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
Mary Hines

Mailing Address 22 Cavalier Way

City State Zip Code  
Latham NY 12110

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

Name of Employer Occupation  
NYS Administrative Officer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: C3166552

Amount of Each Receipt this Period

500.00
--------

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

1625.00
---------

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

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 284  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) Cesari Iman		Date of Receipt MM / DD / YYYY 11 / 08 / 2010
Mailing Address 1431 Brooklyn Blvd.		<b>Transaction ID:</b> C3173042
City Bay Shore	State NY	Zip Code 11706
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2250.00
Name of Employer Hess	Occupation Sales Person	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

**B.**

Full Name (Last, First, Middle Initial) Craig Kaplan		Date of Receipt MM / DD / YYYY 11 / 03 / 2010
Mailing Address 214 East 18th Street		<b>Transaction ID:</b> C3172985
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Levinson & Kaplan	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

**C.**

Full Name (Last, First, Middle Initial) Ernest E. Keet		Date of Receipt MM / DD / YYYY 11 / 03 / 2010
Mailing Address PO Box 1199		<b>Transaction ID:</b> C3176332
City Saranac Lake	State NY	Zip Code 12983
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Vanguard Atlantic, Ltd.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 11 / 284  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 199 N Marginal Rd

City Jericho State NY Zip Code 11753-1633

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

Name of Employer N/A Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 20 / 2010  
**Transaction ID: C3166367**  
 Amount of Each Receipt this Period: 400.00

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

Mailing Address 27 W 67th Street

City New York State NY Zip Code 10023-6258

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

Name of Employer Davis Wright Tremaine Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 18 / 2010  
**Transaction ID: C3166248**  
 Amount of Each Receipt this Period: 500.00

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

Mailing Address 4-74 48th Avenue, Apt. 9B

City Long Island City State NY Zip Code 11109

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

Name of Employer Self Employed Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 11 / 22 / 2010  
**Transaction ID: C3176349**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 284  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Douglas S Land

Mailing Address 60 Deer Hill Road, Box 373

City State Zip Code  
Cornwall on Hudson NY 12520

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

Name of Employer Occupation  
The Chesapeake Group Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** C3168169

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Dorothy H. Lichtenstein

Mailing Address PO Box 1369

City State Zip Code  
Southampton NY 11969-1369

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** C3166948

Amount of Each Receipt this Period  
10000.00

**C.**

Full Name (Last, First, Middle Initial)  
STEPHANIE LOW

Mailing Address 1215 5TH AVE

City State Zip Code  
NEW YORK NY 10029

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

Name of Employer Occupation  
SELF EMPLOYED ARTS MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** C3168197

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 14500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 284  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 28 Cross Road

City State Zip Code  
Syracuse NY 13224-2144

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

Name of Employer Duke Malavenda Group Occupation Businessman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 29 / 2010  
Transaction ID: C3168168  
Amount of Each Receipt this Period: 2000.00

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

Mailing Address 390 Riverside Drive, Apt. 11-A

City State Zip Code  
New York NY 10025-1831

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

Name of Employer Orrick, Herrington & Sutcliffe LLP Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 10 / 26 / 2010  
Transaction ID: C3176341  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 201 Cooper Lake Road

City State Zip Code  
Bearsville NY 12409

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

Name of Employer Self Employed Occupation Artist, Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 20 / 2010  
Transaction ID: C3166922  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Matthew E. Morningstar

Mailing Address 303 Park Avenue South, Apt. 405

City State Zip Code  
New York NY 10010

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

Name of Employer Occupation  
Morgan Stanley Lawyer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

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

Transaction ID: C3176353

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Philip Munger

Mailing Address 40 Fifth Avenue, # 11C

City State Zip Code  
New York NY 10011

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

Name of Employer Occupation  
Self Employed Policy Analyst

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

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

Transaction ID: C3176331

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Eugene Murphy

Mailing Address 2435 Woodland Dr.

City State Zip Code  
Sedalia MO 65301

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4800.00

Date of Receipt

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

Transaction ID: C3172658

Amount of Each Receipt this Period

4800.00

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

7050.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
New York State Democratic Committee

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

Mailing Address 137 East 38 Street, Apt. 9F

City State Zip Code  
New York NY 10016

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NYS Dept. of Law Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY  
11 / 03 / 2010

**Transaction ID:** C3172988

Amount of Each Receipt this Period 125.00

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

Mailing Address 2300 Ocean Avenue

City State Zip Code  
Brooklyn NY 11229

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Brooklyn Amity School Teacher Aid

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt MM / DD / YYYY  
11 / 08 / 2010

**Transaction ID:** C3173039

Amount of Each Receipt this Period 1750.00

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

Mailing Address 50 Lawrence Court

City State Zip Code  
Water Mill NY 11976

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CA, Inc. Corporate Sr. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
11 / 02 / 2010

**Transaction ID:** C3166537

Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3875.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 284  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mehmet Suden

Mailing Address 286 Farnham Ave. Fl. 2

City State Zip Code  
Lodi NJ 07644

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

Name of Employer Ready Travel Agency Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2250.00

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2010

Transaction ID: C3173041

Amount of Each Receipt this Period  
2250.00

**B.**

Full Name (Last, First, Middle Initial)  
Dustin J Todd

Mailing Address 225 5th Street, SE, Apt. B

City State Zip Code  
Washington DC 20003

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

Name of Employer U.S. Federal Government Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
10 / 18 / 2010

Transaction ID: C3166251

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul D. Tonko

Mailing Address 137 Princeton St.

City State Zip Code  
Amsterdam NY 12010-1406

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

Name of Employer U.S. Congress Occupation Congressman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 18 / 2010

Transaction ID: C3172489

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 284  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
New York State Democratic Committee

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

Mailing Address 2092 E 22nd Street

City State Zip Code  
Brooklyn NY 11229

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

Name of Employer Occupation  
Brooklyn Amity School Assistant Business Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2010

**Transaction ID:** C3173006

Amount of Each Receipt this Period  
2400.00

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

Mailing Address 51 Goose Island Road

City State Zip Code  
Steuben ME 04680

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

Name of Employer Occupation  
UBS Investment Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2010

**Transaction ID:** C3172662

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11 Martine Ave

City State Zip Code  
White Plains NY 10606

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 03 / 2010

**Transaction ID:** C3176296

Amount of Each Receipt this Period  
500.00

PARTNERSHIP--partners below if itemized

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3400.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 284

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
FRANK STRENG

Mailing Address 11 MARTINE AVE

City	State	Zip Code
WHITE PLAINS	NY	10606

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

Name of Employer  
MCCARTHY FINGAR LLP

Occupation  
LAWYER

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C3172986

Amount of Each Receipt this Period

500.00
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[MEMO ITEM]

\*

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

69100.00
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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 284  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
BANK OF AMERICA CORPORATION PAC

Mailing Address 1100 North King Street  
DE5-001-02-07

City State Zip Code  
Wilmington DE 19884

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** C3168175

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Committee on Letter Carriers Political Education

Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

**Transaction ID:** C3166475

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS L

Mailing Address 16 COURT STREET 4TH FLOOR

City State Zip Code  
BROOKLYN NY 11241

FEC ID number of contributing federal political committee. **C** C00355818

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 1 0

**Transaction ID:** C3172668

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10250.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

FEC ID number of contributing federal political committee. **C** C00338954

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 2 / 2 0 1 0

**Transaction ID:** C3172665

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
CWA-COPE PCC

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 9 / 2 0 1 0

**Transaction ID:** C3166947

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 25 Louisiana Avenue, NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 7 / 2 0 1 0

**Transaction ID:** C3168200

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends of Didi Barrett

Mailing Address PO Box 1159

City State Zip Code  
Millbrook NY 12545-1159

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 9 / 2 0 1 0

**Transaction ID:** C3176302

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Kathleen Rice 2010

Mailing Address 410 Jericho Turnpike, Suite 303

City State Zip Code  
Jericho NY 11753

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 3 / 2 0 1 0

**Transaction ID:** C3172989

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO Box 37

City State Zip Code  
Roseville MI 48066

FEC ID number of contributing federal political committee. **C** C00156612

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 1 0

**Transaction ID:** C3166532

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) LEVIN FOR CONGRESS		Date of Receipt
	Mailing Address PO Box 37		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseville	MI	48066
	FEC ID number of contributing federal political committee.		Transaction ID: C3168184
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="10000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) LEVIN FOR CONGRESS		Date of Receipt
	Mailing Address PO Box 37		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseville	MI	48066
	FEC ID number of contributing federal political committee.		Transaction ID: C3168195
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="10000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) LEVIN FOR CONGRESS		Date of Receipt
	Mailing Address PO Box 37		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Roseville	MI	48066
	FEC ID number of contributing federal political committee.		Transaction ID: C3168164
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="10000.00"/>	

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 284  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
NADLER FOR CONGRESS INC

Mailing Address Village Station, PO Box 40

City State Zip Code  
New York NY 10014

FEC ID number of contributing federal political committee. **C** C00290825

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

**Transaction ID:** C3176142

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th St NW Ste 420

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** C3176235

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Paul Tonko for Congress

Mailing Address 911 Central Avenue  
PO Box 221

City State Zip Code  
Albany NY 12206

FEC ID number of contributing federal political committee. **C** C00450049

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
11000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** C3172488

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 284
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) SEIU C.O.P.E.		Date of Receipt MM / DD / YYYY 11 / 03 / 2010
Mailing Address 1800 Massachusetts Ave NW		<b>Transaction ID:</b> C3172990
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. <b>C</b> C00004036		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**B.**

Full Name (Last, First, Middle Initial) UNITED ASSOCIATION OF PLUMBERS AND PIPEFITTERS LOC		Date of Receipt MM / DD / YYYY 11 / 04 / 2010
Mailing Address P. O. BOX 1343		<b>Transaction ID:</b> C3173037
City SOUTH GLENS FALLS	State NY	Zip Code 12803
FEC ID number of contributing federal political committee. <b>C</b> C00354142		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	50750.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3131840

Amount of Each Receipt this Period

4131.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3131845

Amount of Each Receipt this Period

12851.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3131846

Amount of Each Receipt this Period

32656.00

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

49638.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  

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

**Transaction ID:** C3131848

Amount of Each Receipt this Period  
5799.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  

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

**Transaction ID:** C3131851

Amount of Each Receipt this Period  
16920.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  

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

**Transaction ID:** C3131854

Amount of Each Receipt this Period  
18000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **40719.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176484

Amount of Each Receipt this Period

1405.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176480

Amount of Each Receipt this Period

100000.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176487

Amount of Each Receipt this Period

102000.00

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

203405.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176488

Amount of Each Receipt this Period

33000.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176481

Amount of Each Receipt this Period

4131.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176482

Amount of Each Receipt this Period

51000.00

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

88131.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176485

Amount of Each Receipt this Period

1405.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176489

Amount of Each Receipt this Period

23131.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176491

Amount of Each Receipt this Period

22213.00

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

46749.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176493

Amount of Each Receipt this Period

7901.00

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176495

Amount of Each Receipt this Period

16920.00

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt

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

Transaction ID: C3176483

Amount of Each Receipt this Period

3419.00

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

28240.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** C3176486

Amount of Each Receipt this Period  
23000.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** C3176490

Amount of Each Receipt this Period  
16062.00

**C.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1276793.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** C3176492

Amount of Each Receipt this Period  
16856.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **55918.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 284  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 430 South Capitol Street SE 2nd Floor		<b>Transaction ID:</b> C3176494
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b> C00000935	Amount of Each Receipt this Period 25648.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1276793.62	

**B.**

Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 430 South Capitol Street SE 2nd Floor		<b>Transaction ID:</b> C3176496
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b> C00000935	Amount of Each Receipt this Period 26920.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1276793.62	

**C.**

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 430 South Capitol Street, SE		<b>Transaction ID:</b> C3166946
City Washington State DC Zip Code 20003	FEC ID number of contributing federal political committee. <b>C</b> C00010603	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175941.91	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>57568.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

C. Form/Schedule : **SA12**  
Transaction ID : **C3166946**

The \$5,000.00 transfer on Schedule A, Line 12 from the Democratic National Committee reflects a party transfer.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175941.91

Date of Receipt: 11 / 03 / 2010  
**Transaction ID:** C3176505  
 Amount of Each Receipt this Period: 3220.00  
 In-Kind: Voter File Access

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

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175941.91

Date of Receipt: 11 / 16 / 2010  
**Transaction ID:** C3176507  
 Amount of Each Receipt this Period: 3220.00  
 In-Kind: Voter File Access

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

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175941.91

Date of Receipt: 11 / 16 / 2010  
**Transaction ID:** C3176508  
 Amount of Each Receipt this Period: 3220.00  
 In-Kind: Voter File Access

**SUBTOTAL** of Receipts This Page (optional) ..... ► 9660.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
DNC State Party Victory Fund

Mailing Address 430 South Capitol Street, S.E.

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
120593.10

Date of Receipt

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

Transaction ID: C3176186

Amount of Each Receipt this Period

81496.77

**B.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City	State	Zip Code
Syracuse	NY	13214

FEC ID number of contributing federal political committee. **C** C00417550

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
185540.00

Date of Receipt

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

Transaction ID: C3176500

Amount of Each Receipt this Period

30000.00

**C.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City	State	Zip Code
Syracuse	NY	13214

FEC ID number of contributing federal political committee. **C** C00417550

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
185540.00

Date of Receipt

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

Transaction ID: C3176501

Amount of Each Receipt this Period

20000.00

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

131496.77

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

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

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

FOR LINE NUMBER: PAGE 36 / 284

(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City State Zip Code  
Syracuse NY 13214

FEC ID number of contributing federal political committee. **C** C00417550

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
185540.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

**Transaction ID:** C3176502

Amount of Each Receipt this Period  
10000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO Box 74

City State Zip Code  
Syracuse NY 13214

FEC ID number of contributing federal political committee. **C** C00417550

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
185540.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** C3176503

Amount of Each Receipt this Period  
8040.00

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

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code  
NEW YORK NY 10022

FEC ID number of contributing federal political committee. **C** C00346312

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** C3176357

Amount of Each Receipt this Period  
350000.00

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

368040.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 66 Arnold Street

City Staten Island State NY Zip Code 10301

FEC ID number of contributing federal political committee. **C** C00451138

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 466451.28

Date of Receipt: 10 / 29 / 2010  
**Transaction ID:** C3176498  
Amount of Each Receipt this Period: 2700.00

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

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

FEC ID number of contributing federal political committee. **C** C00375618

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 273242.91

Date of Receipt: 11 / 09 / 2010  
**Transaction ID:** C3176497  
Amount of Each Receipt this Period: 3442.91

**C.** Full Name (Last, First, Middle Initial)  
SCOTT MURPHY NEW YORK VICTORY FUND 2010

Mailing Address P.O. Box 1174  
%Whitney Burns

City Springfield State VA Zip Code 22151

FEC ID number of contributing federal political committee. **C** C00489104

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125000.00

Date of Receipt: 10 / 20 / 2010  
**Transaction ID:** C3168189  
Amount of Each Receipt this Period: 50000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 56142.91

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

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

Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Adam Blumenthal  
 Mailing Address 324 West 23rd Street  
 City State Zip Code  
New York NY 10011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Blue Wolf Capital Investor  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2010  
**Transaction ID:** C3172490  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Michael Cavanagh  
 Mailing Address 223 Grace Church Street  
 City State Zip Code  
Rye NY 10580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
JP Morgan Banker  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2010  
**Transaction ID:** C3172493  
 Amount of Each Receipt this Period  
 400.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
John S. Dyson  
 Mailing Address 26 Wing Road  
 City State Zip Code  
Millbrook NY 12545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
Millbrook Capital Management Executive  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 5000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 10 / 2010  
**Transaction ID:** C3172494  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert R. Dyson  
Mailing Address 3625 Route 82  
City Millbrook State NY Zip Code 12545  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Dyson Kissner Moran Corp. Occupation Chairman & CEO  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 09 / 28 / 2010  
Transaction ID: C3172495  
Amount of Each Receipt this Period 10000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Jeff Feig  
Mailing Address 225 Central Park West  
City New York State NY Zip Code 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Citigroup Occupation Finance  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 09 / 30 / 2010  
Transaction ID: C3172496  
Amount of Each Receipt this Period 2500.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Michael B. Goldberg  
Mailing Address 320 Park Avenue Floor 24  
City New York State NY Zip Code 10022  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Kelso & Co. Occupation Merchant Banker  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.00  
Date of Receipt 09 / 28 / 2010  
Transaction ID: C3172497  
Amount of Each Receipt this Period 2600.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 104 Chattanooga Street

City State Zip Code  
San Francisco CA 94114

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

Name of Employer iSkoot Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3172498  
Amount of Each Receipt this Period: 4000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 10 Timber Trail

City State Zip Code  
Rye NY 10580

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

Name of Employer The Falconwood Corp. Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 9800.00

Date of Receipt: 09 / 28 / 2010  
Transaction ID: C3172499  
Amount of Each Receipt this Period: 4800.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 120 Hampshire Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Vanity Fair Occupation Contributing Editor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 30 / 2010  
Transaction ID: C3172500  
Amount of Each Receipt this Period: 5000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address PO Box 174

City State Zip Code  
Spencertown NY 12165

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

Name of Employer Occupation  
Cohen Lans LLP Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2010

**Transaction ID:** C3172503

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 51 Forest Way

City State Zip Code  
Essex Fells NJ 07021

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

Name of Employer Occupation  
Citigroup Banking

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2010

**Transaction ID:** C3172505

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 16 Fayerweather Street

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Occupation  
Highland Capital Partners Venture Capitalist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 04 / 2010

**Transaction ID:** C3172511

Amount of Each Receipt this Period  
10000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
James L. Melcher  
Mailing Address 451 West End Avenue #9D  
City New York State NY Zip Code 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Balestra Capital Occupation Investment Manager  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2400.00  
Date of Receipt 09 / 28 / 2010  
Transaction ID: C3172516  
Amount of Each Receipt this Period 2400.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Ronnie Planalp  
Mailing Address 100 Harrington Road  
City Clinton Corners State NY Zip Code 12514  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Film Producer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 10 / 04 / 2010  
Transaction ID: C3172520  
Amount of Each Receipt this Period 1000.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Boake Sells  
Mailing Address 11714 Walton Place  
City Naples State FL Zip Code 34110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00  
Date of Receipt 09 / 19 / 2010  
Transaction ID: C3172521  
Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
John L. Vogelstein  
 Mailing Address 450 Lexington Avenue, 36th Fl.  
 City State Zip Code  
 New York NY 10017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EM Warburg Pincus Vice Chairman  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 600.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 1 0  
**Transaction ID:** C3172522  
 Amount of Each Receipt this Period  
 600.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
SCOTT MURPHY NEW YORK VICTORY FUND 2010  
 Mailing Address P.O. Box 1174  
 %Whitney Burns  
 City State Zip Code  
 Springfield VA 22151  
 FEC ID number of contributing federal political committee. **C** C00489104  
 Name of Employer Occupation  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 125000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 8 / 2 0 1 0  
**Transaction ID:** C3172523  
 Amount of Each Receipt this Period  
 45000.00

**C.** Full Name (Last, First, Middle Initial)  
Brian Archer  
 Mailing Address 141 Noe Avenue  
 City State Zip Code  
 Chatham NJ 07925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Citi Trader  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 2400.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 4 / 2 0 1 0  
**Transaction ID:** C3172570  
 Amount of Each Receipt this Period  
 2400.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ► **45000.00**  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Adam Blumenthal  
Mailing Address 324 West 23rd Street  
City New York State NY Zip Code 10011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Blue Wolf Capital Occupation Investor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172574  
Amount of Each Receipt this Period 1000.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Stephen Clearman  
Mailing Address 52 Garner Road  
City Valatie State NY Zip Code 12184  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Geocapital Partners Occupation Investor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172575  
Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Anthony Davis  
Mailing Address 257 West 17th Street PHA  
City New York State NY Zip Code 10011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Anchorage Capital Occupation Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 10 / 24 / 2010  
Transaction ID: C3172576  
Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 45 / 284  
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 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Larry Divney  
Mailing Address P.O. Box 195  
City State Zip Code  
Stuyvesant NY 12173  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 10 / 25 / 2010  
Transaction ID: C3172578  
Amount of Each Receipt this Period 1000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Michael Dupree  
Mailing Address 30 Curry Lane  
City State Zip Code  
Hyde Park NY 12538  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Writer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2900.00  
Date of Receipt 10 / 15 / 2010  
Transaction ID: C3172595  
Amount of Each Receipt this Period 500.00  
[MEMO ITEM]  
\* Scott Murhpy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Jessica Fass  
Mailing Address 8 Cathlow Drive  
City State Zip Code  
Riverside CT 06878  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Photographer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5500.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172614  
Amount of Each Receipt this Period 2000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

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

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

Use separate schedule(s)  
for each category of the  
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 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward Fishman  
Mailing Address 363 Greenwich Street #4B  
City New York State NY Zip Code 10013  
FEC ID number of contributing federal political committee. **C**  
Name of Employer D.E. Shaw Occupation Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172615  
Amount of Each Receipt this Period 10000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Mark Jacobstein  
Mailing Address 104 Chattanooga Street  
City San Francisco State CA Zip Code 94114  
FEC ID number of contributing federal political committee. **C**  
Name of Employer iSkoot Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172617  
Amount of Each Receipt this Period 6000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Henry G. Jarecki  
Mailing Address 10 Timber Trail  
City Rye State NY Zip Code 10580  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Falconwood Corp. Occupation Chairman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 9800.00  
Date of Receipt 10 / 20 / 2010  
Transaction ID: C3172621  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 47 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Harry P. Kamen  
Mailing Address 910 Park Avenue  
City New York State NY Zip Code 10075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 10 / 21 / 2010  
Transaction ID: C3172622  
Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Sarah Kovner  
Mailing Address 27 W 67th St  
City New York State NY Zip Code 10023-6258  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Consultant  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 17 / 2010  
Transaction ID: C3172623  
Amount of Each Receipt this Period 500.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Henry Lord  
Mailing Address 313 Audubon Court  
City New Haven State CT Zip Code 06510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Investor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00  
Date of Receipt 10 / 15 / 2010  
Transaction ID: C3172624  
Amount of Each Receipt this Period 2000.00  
**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

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

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

FOR LINE NUMBER: PAGE 48 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
George McNamee  
 Mailing Address 677 Broadway  
 City Albany State NY Zip Code 12207  
 Date of Receipt 10 / 21 / 2010  
**Transaction ID:** C3172626  
 Amount of Each Receipt this Period 325.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer FA Tech Ventures Occupation Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 325.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Ronnie Planalp  
 Mailing Address 100 Harrington Road  
 City Clinton Corners State NY Zip Code 12514  
 Date of Receipt 10 / 24 / 2010  
**Transaction ID:** C3172627  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self-Employed Occupation Film Producer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 2000.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Boake Sells  
 Mailing Address 11714 Walton Place  
 City Naples State FL Zip Code 34110  
 Date of Receipt 10 / 21 / 2010  
**Transaction ID:** C3172628  
 Amount of Each Receipt this Period 2000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 4500.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

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

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

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

FOR LINE NUMBER: PAGE 49 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
John Thompson  
 Mailing Address 580 Manzanita Way  
 City State Zip Code  
 Woodside CA 94062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VI CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt: 10 / 24 / 2010  
**Transaction ID:** C3172629  
 Amount of Each Receipt this Period: 1000.00  
**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
SCOTT MURPHY NEW YORK VICTORY FUND - Unitemized  
 Mailing Address P.O. Box 1174  
 %Whitney Burns  
 City State Zip Code  
 Springfield VA 22151  
 FEC ID number of contributing federal political committee. **C** C00489104  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00  
 Date of Receipt: 10 / 28 / 2010  
**Transaction ID:** CZ3172523  
 Amount of Each Receipt this Period: 100.00  
**[MEMO ITEM]**  
 \*

**C.** Full Name (Last, First, Middle Initial)  
SCOTT MURPHY NEW YORK VICTORY FUND 2010  
 Mailing Address P.O. Box 1174  
 %Whitney Burns  
 City State Zip Code  
 Springfield VA 22151  
 FEC ID number of contributing federal political committee. **C** C00489104  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125000.00  
 Date of Receipt: 11 / 03 / 2010  
**Transaction ID:** C3173043  
 Amount of Each Receipt this Period: 30000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 30000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 50 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address Six Concourse Pkwy. #1800

City Atlanta State GA Zip Code 30328

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

Name of Employer Field Hand Productions Occupation Film Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 28 / 2010

Transaction ID: C3173045

Amount of Each Receipt this Period 10000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 3625 Route 82

City Millbrook State NY Zip Code 12545

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

Name of Employer Dutchess Day School Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2010

Transaction ID: C3173046

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

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

Mailing Address 8 Cathlow Drive

City Riverside State CT Zip Code 06878

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

Name of Employer Self Employed Occupation Photographer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5500.00

Date of Receipt 10 / 31 / 2010

Transaction ID: C3173048

Amount of Each Receipt this Period 3500.00

**[MEMO ITEM]**  
\* Scott Murphy NY Victory Fund 2010

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Mark Gallogly  
Mailing Address 300 Central Park West # 25D  
City New York State NY Zip Code 10025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Centerbridge Partners LP Occupation Co-Founder  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: C3173049  
Amount of Each Receipt this Period 2500.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**B.** Full Name (Last, First, Middle Initial)  
Sunil Hirani  
Mailing Address 36 Andrews Farm Road  
City Greenwich State CT Zip Code 06831  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Financial Technology  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 10 / 31 / 2010  
Transaction ID: C3173050  
Amount of Each Receipt this Period 5000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Henry Lord  
Mailing Address 313 Audubon Court  
City New Haven State CT Zip Code 06510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Investor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00  
Date of Receipt 10 / 31 / 2010  
Transaction ID: C3173053  
Amount of Each Receipt this Period 2000.00  
[MEMO ITEM]  
\* Scott Murphy NY Victory Fund 2010

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 284  
 (check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Patricia Pacelli

Mailing Address 255 West 84th Street #7C

City State Zip Code  
New York NY 10024

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

Name of Employer Self Employed Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 7 / 2 0 1 0

Transaction ID: C3173055

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
 \* Scott Murphy NY Victory Fund 2010

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	1210707.68

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
McMahon for Congress

Mailing Address 66 Arnold Street

City State Zip Code  
Staten Island NY 10301

FEC ID number of contributing federal political committee. **C** C00451138

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
466451.28

Date of Receipt

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

Transaction ID: C3129696

Amount of Each Receipt this Period

7959.36

Payroll Expenses

**B.**

Full Name (Last, First, Middle Initial)  
McMahon for Congress

Mailing Address 66 Arnold Street

City State Zip Code  
Staten Island NY 10301

FEC ID number of contributing federal political committee. **C** C00451138

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
466451.28

Date of Receipt

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

Transaction ID: C3176499

Amount of Each Receipt this Period

3500.00

Payroll Expenses

**C.**

Full Name (Last, First, Middle Initial)  
New York County Democratic Committee

Mailing Address 461 Park Avenue South,  
10th Floor

City State Zip Code  
New York NY 10016

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
13350.00

Date of Receipt

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

Transaction ID: C3176027

Amount of Each Receipt this Period

3350.00

Office Rent

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

14809.36

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

14809.36

C. Form/Schedule : **SA15**  
Transaction ID : **C3176027**

This is not a contribution. This is an offset to the rent that we paid to Rose Hill Property Association Inc.

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

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

FOR LINE NUMBER: PAGE 55 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION

Mailing Address 777 6th Street, NW  
Suite 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Recount

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 2 / 2 0 1 0

**Transaction ID:** C3176347

Amount of Each Receipt this Period  
5000.00

**[MEMO ITEM]**  
\* NY Victory Fund 2010

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

Mailing Address 907 Manor Way

City Los Altos State CA Zip Code 94024

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Recount

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 2 / 2 0 1 0

**Transaction ID:** C3176338

Amount of Each Receipt this Period  
2600.00

**[MEMO ITEM]**  
\* NY Victory Fund 2010

**C.** Full Name (Last, First, Middle Initial)  
Friends of Didi Barrett

Mailing Address PO Box 1159

City Millbrook State NY Zip Code 12545-1159

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 1 / 2 0 1 0

**Transaction ID:** C3176303

Amount of Each Receipt this Period  
1700.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1700.00**

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

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

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

FOR LINE NUMBER: PAGE 56 / 284  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
I.B.E.W.-C.O.P.E.  
Mailing Address 900 Seventh St. N.W.  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00027342  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Recount Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 11 / 15 / 2010  
**Transaction ID: C3184815**  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
NY VICTORY FUND 2010  
Mailing Address 1050 17TH ST NW SUITE 590  
City WASHINGTON State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00491134  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Recount Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 11 / 22 / 2010  
**Transaction ID: C3176090**  
Amount of Each Receipt this Period 10000.00

**C.** Full Name (Last, First, Middle Initial)  
SEIU C.O.P.E.  
Mailing Address 1800 Massachusetts Ave NW  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00004036  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Recount Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 11 / 22 / 2010  
**Transaction ID: C3176340**  
Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
\* NY Victory Fund 2010

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

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

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

FOR LINE NUMBER: PAGE 57 / 284

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 777

City State Zip Code  
DEER PARK NY 11729

FEC ID number of contributing federal political committee. **C** C00358952

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Recount

Aggregate Year-to-Date ▼  
12000.00

Date of Receipt

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

Transaction ID: C3176334

Amount of Each Receipt this Period

2000.00

**[MEMO ITEM]**

\* NY Victory Fund 2010

**B.**

Full Name (Last, First, Middle Initial)  
Eric Wepsic

Mailing Address 255 W 84th Street, #7C

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
D. E. Shaw & Co. Financial Executive

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Recount

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt

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

Transaction ID: C3176337

Amount of Each Receipt this Period

2600.00

**[MEMO ITEM]**

\* NY Victory Fund 2010

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

0.00

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

16700.00

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) 2007 Partners	Transaction ID: D250944 Date of Disbursement 11 / 10 / 2010
	Mailing Address 36 Beverly Place	Amount of Each Disbursement this Period 442.04
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement Office Rent & Utilities	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D251008 Date of Disbursement 10 / 17 / 2010
	Mailing Address P.O. Box 382110	Amount of Each Disbursement this Period 21.93
	City Cambridge State MA Zip Code 02238-2110	
	Purpose of Disbursement Credit Card Processing Fee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D251172 Date of Disbursement 10 / 24 / 2010
	Mailing Address P.O. Box 382110	Amount of Each Disbursement this Period 127.61
	City Cambridge State MA Zip Code 02238-2110	
	Purpose of Disbursement Credit Card Processing Fee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	591.58
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D251230 Date of Disbursement
	Mailing Address P.O. Box 382110	<input type="text" value="10"/> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="27"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="Y"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="231.08"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D251267 Date of Disbursement
	Mailing Address P.O. Box 382110	<input type="text" value="10"/> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="31"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="Y"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="180.14"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D251292 Date of Disbursement
	Mailing Address P.O. Box 382110	<input type="text" value="11"/> <input type="text" value="M"/> / <input type="text" value="02"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="Y"/> <input type="text" value="10"/> <input type="text" value="Y"/>
	City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fee	<input type="text" value="246.89"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="658.11"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Steve Balik	Transaction ID: D250209 Date of Disbursement 11 / 10 / 2010
	Mailing Address 7 Henry Avenue	Amount of Each Disbursement this Period 546.84
	City Centereach State NY Zip Code 11720	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: D251642 Date of Disbursement 10 / 18 / 2010
	Mailing Address PO Box 371897	Amount of Each Disbursement this Period 487.84
	City Pittsburgh State PA Zip Code 15250-7897	
	Purpose of Disbursement Telephone & Internet	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: D251645 Date of Disbursement 10 / 18 / 2010
	Mailing Address PO Box 371378	Amount of Each Disbursement this Period 158.87
	City Pittsburgh State PA Zip Code 15250-7378	
	Purpose of Disbursement Telephone & Internet	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1193.55
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Cablevision Mailing Address PO Box 371378 City Pittsburgh State PA Zip Code 15250-7378 Purpose of Disbursement Telephone & Internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D251650 Date of Disbursement 11 / 17 / 2010 Amount of Each Disbursement this Period 194.65 Category/Type
B.	Full Name (Last, First, Middle Initial) Consolidated Edison Company of N.Y. Inc. Mailing Address JAF Station P.O. Box 1702 City New York State NY Zip Code 10116-1702 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D251647 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 254.59 Category/Type
C.	Full Name (Last, First, Middle Initial) Consolidated Edison Company of N.Y. Inc. Mailing Address JAF Station P.O. Box 1702 City New York State NY Zip Code 10116-1702 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D252100 Date of Disbursement 11 / 03 / 2010 Amount of Each Disbursement this Period 2068.87 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2518.11
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D252105 <b>Date of Disbursement</b> 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 3220.00</p> <p>* In-Kind Received</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D252107 <b>Date of Disbursement</b> 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 3220.00</p> <p>* In-Kind Received</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic National Committee</p> <p>Mailing Address 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D252111 <b>Date of Disbursement</b> 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 3220.00</p> <p>* In-Kind Received</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9660.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Hess Corporation	Transaction ID: D252258 Date of Disbursement 10 / 14 / 2010
	Mailing Address One Hess Plaza	Amount of Each Disbursement this Period 760.00
	City Woodbridge State NJ Zip Code 07095	
	Purpose of Disbursement Gas Cards	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hess Corporation	Transaction ID: D250518 Date of Disbursement 10 / 20 / 2010
	Mailing Address One Hess Plaza	Amount of Each Disbursement this Period 1485.00
	City Woodbridge State NJ Zip Code 07095	
	Purpose of Disbursement Gas Cards	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hess Corporation	Transaction ID: D250519 Date of Disbursement 10 / 28 / 2010
	Mailing Address One Hess Plaza	Amount of Each Disbursement this Period 500.00
	City Woodbridge State NJ Zip Code 07095	
	Purpose of Disbursement Gas Cards	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2745.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Marcy, L.P.	Transaction ID: D250956 Date of Disbursement 11 / 10 / 2010
	Mailing Address 112 Franklin Street	Amount of Each Disbursement this Period 325.00
	City Watertown State NY Zip Code 13601	
	Purpose of Disbursement Office Rent	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) National Grid	Transaction ID: D251522 Date of Disbursement 11 / 22 / 2010
	Mailing Address P.O. Box 1303	Amount of Each Disbursement this Period -44.90
	City Buffalo State NY Zip Code 14240	
	Purpose of Disbursement Vendor Refund-Utilities	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) National Grid	Transaction ID: D251694 Date of Disbursement 10 / 20 / 2010
	Mailing Address P.O. Box 1303	Amount of Each Disbursement this Period 46.60
	City Buffalo State NY Zip Code 14240	
	Purpose of Disbursement Utilities	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>326.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252079 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 84.60
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252080 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 52.77
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252081 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 48.82
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	186.19
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252083 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 164.42
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252084 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 57.46
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252085 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 389.42
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>611.30</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251931 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 67.70
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251932 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 252.06
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251933 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 198.85
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>518.61</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: D252088 Date of Disbursement 10 / 18 / 2010
	Mailing Address P.O. Box 7247-0244	Amount of Each Disbursement this Period 169.34
	City Philadelphia State PA Zip Code 19170-0001	
	Purpose of Disbursement Shipping Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: D252089 Date of Disbursement 10 / 18 / 2010
	Mailing Address P.O. Box 7247-0244	Amount of Each Disbursement this Period 25.12
	City Philadelphia State PA Zip Code 19170-0001	
	Purpose of Disbursement Shipping Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: D252090 Date of Disbursement 10 / 18 / 2010
	Mailing Address P.O. Box 7247-0244	Amount of Each Disbursement this Period 195.04
	City Philadelphia State PA Zip Code 19170-0001	
	Purpose of Disbursement Shipping Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>389.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
UPS

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D252091  
Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

39.13

B.

Full Name (Last, First, Middle Initial)  
Westbury Property Management Group, LLC

Mailing Address Suite 7A Clinton Plaza 110-120 Mai

City Oneonta State NY Zip Code 13820

Purpose of Disbursement  
Office Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D250948  
Date of Disbursement

11 / 10 / 2010

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)  
Alexander I. Edelman

Mailing Address 20 Clinton Street, #2

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D250954  
Date of Disbursement

11 / 10 / 2010

Amount of Each Disbursement this Period

1911.64

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

2450.77

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
AT&T Store

Mailing Address 43 Smithfield Blvd.

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement  
Cell Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251862  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

Mailing Address 60 Smithfield Blvd., Ste 109

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement  
Cell Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251906  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

Mailing Address 6033 St. Lawrence Center

City Massena State NY Zip Code 13662

Purpose of Disbursement  
Toner & Paper

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251910  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address 124 Consumer Square

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement Cell Phones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251828  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

Mailing Address 77 Consumer Square

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement Toner & Paper

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251816  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

Mailing Address 60 Smithfield Blvd.

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement Phones & Refreshments

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251899  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) The Computer Guys</p> <p>Mailing Address 4 Clarkson Avenue</p> <p>City Potsdam State NY Zip Code 13676</p> <p>Purpose of Disbursement Printer &amp; Toner</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251924 <b>Date of Disbursement</b> 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 256.64</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Wal-Mart</p> <p>Mailing Address 7494 Us Highway 11</p> <p>City Potsdam State NY Zip Code 13676</p> <p>Purpose of Disbursement Phones, Paper &amp; Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251857 <b>Date of Disbursement</b> 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 259.09</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 1270</p> <p>City Newark State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement Credit Card Payment-see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D252171 <b>Date of Disbursement</b> 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2370.35</p>

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

2370.35

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amazon.com Mailing Address 1516 2nd Avenue, FL 4 City Seattle State WA Zip Code 98101-1543 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D252177 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 802.48 [MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) Vesta Boost Mobile Mailing Address 11950 SW Garden Pl City Portland State OR Zip Code 97223 Purpose of Disbursement Cell Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D252174 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 1567.87 [MEMO ITEM]

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

0.00

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

24219.77

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> D252283 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 28000.00
	City: Washington State: DC Zip Code: 20003		
	Purpose of Disbursement Party Transfer Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> D252292 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 48181.04
	City: Washington State: DC Zip Code: 20003		
	Purpose of Disbursement Party Transfer Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> D252294 Date of Disbursement 11 / 19 / 2010	
	Mailing Address 430 South Capitol Street SE 2nd Floor		Amount of Each Disbursement this Period 33000.00
	City: Washington State: DC Zip Code: 20003		
	Purpose of Disbursement Party Transfer Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>109181.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE			Transaction ID: D252296	
	Mailing Address 430 South Capitol Street SE 2nd Floor			Date of Disbursement MM / DD / YYYY 11 / 19 / 2010	
	City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 5092.13	
	Purpose of Disbursement Party Transfer		Category/ Type		
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5092.13
<b>TOTAL</b> This Period (last page this line number only) .....	114273.17

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends of Didi Barrett

Mailing Address PO Box 1159

City Millbrook State NY Zip Code 12545-1159

Purpose of Disbursement  
Trxfr non-fed portion to non-fed account

Candidate Name  
Didi Barrett

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D252321  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
New York County Democratic Committee

Mailing Address 461 Park Avenue South,  
10th Floor

City New York State NY Zip Code 10016

Purpose of Disbursement  
County Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: D251002  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lucas Abad</p> <p>Mailing Address 815 N. Broadway</p> <p>City Saratoga Springs State NY Zip Code 12866</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247207</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.08"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Adonilo</p> <p>Mailing Address 34 Woods End Road</p> <p>City Hartsdale State NY Zip Code 10530</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250205</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Adonilo</p> <p>Mailing Address 34 Woods End Road</p> <p>City Hartsdale State NY Zip Code 10530</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250214</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="546.84"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1394.65"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Aetna	Transaction ID: D252095 Date of Disbursement 11 / 02 / 2010
	Mailing Address P.O. Box 7247-0233	Amount of Each Disbursement this Period 42.20
	City Philadelphia State PA Zip Code 19170-0233	
	Purpose of Disbursement Health Insurance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Aetna	Transaction ID: D252096 Date of Disbursement 11 / 02 / 2010
	Mailing Address P.O. Box 7247-0233	Amount of Each Disbursement this Period 42.20
	City Philadelphia State PA Zip Code 19170-0233	
	Purpose of Disbursement Health Insurance	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Derick Agyiri	Transaction ID: D246792 Date of Disbursement 10 / 29 / 2010
	Mailing Address 28 Trinity Avenue	Amount of Each Disbursement this Period 36.74
	City Spring Valley State NY Zip Code 10977	
	Purpose of Disbursement GOTV Canvassing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	121.14
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Alexandra Aiello	Transaction ID: D250429 Date of Disbursement 11 / 10 / 2010
	Mailing Address P.O. Box 81	Amount of Each Disbursement this Period 780.41
	City Callicoon Center State NY Zip Code 12724	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alexandra Aiello	Transaction ID: D250159 Date of Disbursement 10 / 27 / 2010
	Mailing Address P.O. Box 81	Amount of Each Disbursement this Period 780.41
	City Callicoon Center State NY Zip Code 12724	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ashley Albertelli	Transaction ID: D247100 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1204 Route 376	Amount of Each Disbursement this Period 361.78
	City Wappings Falls State NY Zip Code 12590	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1922.60
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Kathryn Alexander  Mailing Address 620 Madison Avenue, Apt. 5  City Albany State NY Zip Code 12208  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247208 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 97.32  Category/ Type
B.	Full Name (Last, First, Middle Initial) Anjani Amin  Mailing Address 112 Echo Valley Road  City Red Hook State NY Zip Code 12571  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247209 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 82.66  Category/ Type
C.	Full Name (Last, First, Middle Initial) Anjani Amin  Mailing Address 112 Echo Valley Road  City Red Hook State NY Zip Code 12571  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246855 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 251.80  Category/ Type

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

**431.78**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Blake Anderson	Transaction ID: D250166 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11 Sunset Bay Drive	Amount of Each Disbursement this Period 1180.64
	City Belleair State FL Zip Code 33756	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Blake Anderson	Transaction ID: D250436 Date of Disbursement 11 / 10 / 2010
	Mailing Address 11 Sunset Bay Drive	Amount of Each Disbursement this Period 1180.64
	City Belleair State FL Zip Code 33756	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Angelo Auteri	Transaction ID: D247102 Date of Disbursement 11 / 09 / 2010
	Mailing Address 45 South Street	Amount of Each Disbursement this Period 349.73
	City Warwick State NY Zip Code 10990	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2711.01
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Donald Baker	Transaction ID: D247210 Date of Disbursement 11 / 09 / 2010
	Mailing Address 2881 Meadowbrook Blvd.	Amount of Each Disbursement this Period 88.18
	City Cleveland State OH Zip Code 44118	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steve Balik	Transaction ID: D250206 Date of Disbursement 10 / 27 / 2010
	Mailing Address 7 Henry Avenue	Amount of Each Disbursement this Period 803.73
	City Centereach State NY Zip Code 11720	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steve Bass	Transaction ID: D250224 Date of Disbursement 11 / 10 / 2010
	Mailing Address 300 North Central Avenue, Apt. 1A	Amount of Each Disbursement this Period 921.95
	City Hartsdale State NY Zip Code 10530	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1813.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steve Bass</p> <p>Mailing Address 300 North Central Avenue, Apt. 1A</p> <p>City Hartsdale State NY Zip Code 10530</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250145</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1663.81"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Judy Battista</p> <p>Mailing Address 64 Laudaten Way</p> <p>City Warwick State NY Zip Code 10990</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247105</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="220.44"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Alberta Bell</p> <p>Mailing Address 808 Waverly Place</p> <p>City Utica State NY Zip Code 13502</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247152</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="448.94"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2333.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Alberta Bell	Transaction ID: D246803 Date of Disbursement 10 / 29 / 2010
	Mailing Address 808 Waverly Place	Amount of Each Disbursement this Period 314.86
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Mark Bell	Transaction ID: D246804 Date of Disbursement 10 / 29 / 2010
	Mailing Address 808 Waverly Place	Amount of Each Disbursement this Period 346.20
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Mark Bell	Transaction ID: D247153 Date of Disbursement 11 / 09 / 2010
	Mailing Address 808 Waverly Place	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1110.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Sabrina Bell <hr/> Mailing Address 808 Waverly Place <hr/> City Utica State NY Zip Code 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D247154 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 419.60
B.	Full Name (Last, First, Middle Initial) Sabrina Bell <hr/> Mailing Address 808 Waverly Place <hr/> City Utica State NY Zip Code 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D246805 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 283.52
C.	Full Name (Last, First, Middle Initial) Josh Benash <hr/> Mailing Address 5 Digger Phelps Court <hr/> City Beacon State NY Zip Code 12508 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D247211 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 422.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1125.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dave Berenbaum</p> <p>Mailing Address 8 Hampton Pl</p> <p>City Staten Island State NY Zip Code 10309</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247713</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="222.83"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Eamonn F. Berry</p> <p>Mailing Address 23 N. Brette Street</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250146</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Eamonn F. Berry</p> <p>Mailing Address 23 N. Brette Street</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250225</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1830.29"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Nitza Betancourt <hr/> Mailing Address 2630 Kingsbridge Terrace <hr/> City State Zip Code Bronx NY 10463 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250925 <b>Date of Disbursement</b> <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="45.92"/>
	<input type="text"/>
	<input type="text"/>
<b>B.</b> Full Name (Last, First, Middle Initial) Alex Bland <hr/> Mailing Address 815 North Broadway <hr/> City State Zip Code Saratoga Springs NY 12866 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247212 <b>Date of Disbursement</b> <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="433.87"/>
	<input type="text"/>
	<input type="text"/>
<b>C.</b> Full Name (Last, First, Middle Initial) Donald Bowens <hr/> Mailing Address 628 Plant Street <hr/> City State Zip Code Utica NY 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246806 <b>Date of Disbursement</b> <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="36.74"/>
	<input type="text"/>
	<input type="text"/>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Nora Boyle	Transaction ID: D246856 Date of Disbursement 10 / 29 / 2010
	Mailing Address 768 Myrtle	Amount of Each Disbursement this Period 93.69
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nora Boyle	Transaction ID: D247714 Date of Disbursement 10 / 15 / 2010
	Mailing Address 768 Myrtle	Amount of Each Disbursement this Period 82.66
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cassandra Bradley	Transaction ID: D246807 Date of Disbursement 10 / 29 / 2010
	Mailing Address 21 Shaw Street	Amount of Each Disbursement this Period 283.52
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	459.87
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Cassandra Bradley	Transaction ID: D247155 Date of Disbursement 11 / 09 / 2010
	Mailing Address 21 Shaw Street	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Chris Bradt	Transaction ID: D246857 Date of Disbursement 10 / 29 / 2010
	Mailing Address 33 Jacob Drive	Amount of Each Disbursement this Period 88.18
	City Delmar State NY Zip Code 12054	
	Purpose of Disbursement GOTV Canvassing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Chris Bradt	Transaction ID: D247213 Date of Disbursement 11 / 09 / 2010
	Mailing Address 33 Jacob Drive	Amount of Each Disbursement this Period 339.74
	City Delmar State NY Zip Code 12054	
	Purpose of Disbursement GOTV Canvassing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

876.86

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven Brauer</p> <p>Mailing Address 347 Hudson Avenue</p> <p>City Albany State NY Zip Code 12210</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247214 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 88.18</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Johnny Bravo</p> <p>Mailing Address 4 Stephanie Lane</p> <p>City Mahopac State NY Zip Code 10541</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247110 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 146.96</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Margaret Bright</p> <p>Mailing Address 3003 Cherry Hill Drive</p> <p>City Poughkeepsie State NY Zip Code 12603</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246859 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 393.52</p>

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

628.66

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Margaret Bright	Transaction ID: D247215 Date of Disbursement 11 / 09 / 2010
	Mailing Address 3003 Cherry Hill Drive	Amount of Each Disbursement this Period 441.22
	City Poughkeepsie State NY Zip Code 12603	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Margaret Bright	Transaction ID: D247715 Date of Disbursement 10 / 15 / 2010
	Mailing Address 3003 Cherry Hill Drive	Amount of Each Disbursement this Period 336.52
	City Poughkeepsie State NY Zip Code 12603	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Marc Bristol	Transaction ID: D247156 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1621 Clementain Street	Amount of Each Disbursement this Period 165.33
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	943.07
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mark Brooks	Transaction ID: D247157 Date of Disbursement 11 / 09 / 2010
	Mailing Address 201 King Street	Amount of Each Disbursement this Period 202.07
	City Herkimer State NY Zip Code 13350	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mark Brooks	Transaction ID: D246808 Date of Disbursement 10 / 29 / 2010
	Mailing Address 201 King Street	Amount of Each Disbursement this Period 146.96
	City Herkimer State NY Zip Code 13350	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Susie L. Brooks	Transaction ID: D247216 Date of Disbursement 11 / 09 / 2010
	Mailing Address 2 Royal Crest Road	Amount of Each Disbursement this Period 88.18
	City Hyde Park State NY Zip Code 12538	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	437.21
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Boris Broomes	Transaction ID: D247217
	Mailing Address 6 Leonard Place	Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	City Albany State NY Zip Code 12202	Amount of Each Disbursement this Period 121.25
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Arthur Brown	Transaction ID: D247114
	Mailing Address 14 A Miller Street	Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	City Beacon State NY Zip Code 12508	Amount of Each Disbursement this Period 220.44
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Keenan Brown	Transaction ID: D247158
	Mailing Address 508 Jefferson Avenue	Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	City Utica State NY Zip Code 13501	Amount of Each Disbursement this Period 283.52
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	625.21
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Keenan Brown</p> <p>Mailing Address 508 Jefferson Avenue</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246809</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="146.96"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mathew J. Burdine</p> <p>Mailing Address 3745 SW Austin Street</p> <p>City Seattle State WA Zip Code 98126</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250231</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mathew J. Burdine</p> <p>Mailing Address 3745 SW Austin Street</p> <p>City Seattle State WA Zip Code 98126</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250152</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1707.78"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Stephanie Cabey	Transaction ID: D247116 Date of Disbursement 11 / 09 / 2010
	Mailing Address 137 Lanyard Road	Amount of Each Disbursement this Period 36.74
	City Manahawkin State NJ Zip Code 08050	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Cahill	Transaction ID: D246871 Date of Disbursement 10 / 29 / 2010
	Mailing Address 9 Iroquois Trail	Amount of Each Disbursement this Period 404.93
	City Airmont State NY Zip Code 10952	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Cahill	Transaction ID: D247218 Date of Disbursement 11 / 09 / 2010
	Mailing Address 9 Iroquois Trail	Amount of Each Disbursement this Period 391.73
	City Airmont State NY Zip Code 10952	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>833.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Cahill</p> <p>Mailing Address 9 Iroquois Trail</p> <p>City Airmont State NY Zip Code 10952</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247716</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="299.19"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Colin Caldwell</p> <p>Mailing Address 111 Pine Drive</p> <p>City Black River State NY Zip Code 13612</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247427</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88.18"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joey Campbell</p> <p>Mailing Address 1222 Butternut Street</p> <p>City Utica State NY Zip Code 13502</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246810</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="219.71"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="607.08"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Joey Campbell <hr/> Mailing Address 1222 Butternut Street <hr/> City Utica State NY Zip Code 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247159 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 110.22
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Campbell <hr/> Mailing Address 1222 Butternut Street <hr/> City Utica State NY Zip Code 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247160 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 36.74
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Campbell <hr/> Mailing Address 1222 Butternut Street <hr/> City Utica State NY Zip Code 13502 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246811 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 183.70
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	330.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Ted Cangero</p> <p>Mailing Address 21 Bradford Street Apt 1</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246872</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 44.08</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ted Cangero</p> <p>Mailing Address 21 Bradford Street Apt 1</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247718</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 41.33</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Lee Carr</p> <p>Mailing Address 506 Wetmore Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246812</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 146.96</p>

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

232.37

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lee Carr</p> <p>Mailing Address 506 Wetmore Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247161</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.74"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hon. Tom Caruso</p> <p>Mailing Address 1172 River Rd</p> <p>City Norwood State NY Zip Code 13668-3104</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247162</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="330.53"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tom Caruso</p> <p>Mailing Address 7 Christing Court</p> <p>City New Hartford State CT Zip Code 13413</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247700</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="183.70"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Michael Cass-Antony  Mailing Address 297 6th Avenue, #3  City Brooklyn State NY Zip Code 11215  Purpose of Disbursement Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250321 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 780.41
B.	Full Name (Last, First, Middle Initial) Michael Cass-Antony  Mailing Address 297 6th Avenue, #3  City Brooklyn State NY Zip Code 11215  Purpose of Disbursement Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250437 Date of Disbursement 11 / 10 / 2010  Amount of Each Disbursement this Period 780.41
C.	Full Name (Last, First, Middle Initial) Daval L Catts  Mailing Address 159 Washington Street, Apt. 7AS  City Poughkeepsie State NY Zip Code 12601  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247431 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 198.40

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

1759.22

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adam Cauger</p> <p>Mailing Address 11 South Lake Avenue</p> <p>City Albany State NY Zip Code 12203</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247434 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 45.96</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Maciha Chagtai</p> <p>Mailing Address 543 Washington Avenue, Apt. 1</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247436 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 64.26</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Christopher M. Chan</p> <p>Mailing Address 11 Marshall Road, Suite 16</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247120 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 142.36</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>252.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ian Cooper <hr/> Mailing Address 132 Cottage Street <hr/> City Concord State MA Zip Code 01742 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247438 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 44.08
<b>B.</b>	Full Name (Last, First, Middle Initial) Rebecca Cornell <hr/> Mailing Address 1714 D Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Wages <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250430 Date of Disbursement 11 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 803.73
<b>C.</b>	Full Name (Last, First, Middle Initial) Rebecca Cornell <hr/> Mailing Address 1714 D Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Wages <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250160 Date of Disbursement 10 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 803.73

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

1651.54

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mia Costa	Transaction ID: D247439
	Mailing Address 226 Tulip Avenue	Date of Disbursement 11 / 09 / 2010
	City Floral Park State NY Zip Code 11001	Amount of Each Disbursement this Period 44.08
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mia Costa	Transaction ID: D246879
	Mailing Address 226 Tulip Avenue	Date of Disbursement 10 / 29 / 2010
	City Floral Park State NY Zip Code 11001	Amount of Each Disbursement this Period 132.26
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Forrest Cotton	Transaction ID: D246875
	Mailing Address 125 High Street	Date of Disbursement 10 / 29 / 2010
	City Catskill State NY Zip Code 12414	Amount of Each Disbursement this Period 151.55
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>327.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Forrest Cotton Mailing Address 125 High Street City Catskill State NY Zip Code 12414 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247440 Date of Disbursement 11 / 09 / 2010 Amount of Each Disbursement this Period 575.71	
<b>B.</b>	Full Name (Last, First, Middle Initial) Phil Cowcer Mailing Address 1205 McFadden Drive City East Northport State NY Zip Code 11731 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247442 Date of Disbursement 11 / 09 / 2010 Amount of Each Disbursement this Period 261.11	
<b>C.</b>	Full Name (Last, First, Middle Initial) Phil Cowcer Mailing Address 1205 McFadden Drive City East Northport State NY Zip Code 11731 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247720 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 261.81	

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

1098.63

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Phil Cowcer  Mailing Address 1205 McFadden Drive  City East Northport State NY Zip Code 11731  Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span>  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:	Transaction ID: D246876 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 225.98
<b>B.</b>	Full Name (Last, First, Middle Initial) Adrian Culea  Mailing Address 266 Route 9  City Fishkill State NY Zip Code 12524  Purpose of Disbursement Wages Candidate Name <span style="float: right;">Category/ Type</span>  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:	Transaction ID: D250147 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 780.41
<b>C.</b>	Full Name (Last, First, Middle Initial) Adrian Culea  Mailing Address 266 Route 9  City Fishkill State NY Zip Code 12524  Purpose of Disbursement Wages Candidate Name <span style="float: right;">Category/ Type</span>  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:	Transaction ID: D250226 Date of Disbursement 11 / 10 / 2010  Amount of Each Disbursement this Period 780.41

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1786.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Thomas Culkin	Transaction ID: D247443 Date of Disbursement 11 / 09 / 2010
	Mailing Address 7 Ivy League Lane	Amount of Each Disbursement this Period 88.18
	City Stony Brook State NY Zip Code 11790	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael J. Cunningham	Transaction ID: D250227 Date of Disbursement 11 / 10 / 2010
	Mailing Address 2007 Luzerne Avenue	Amount of Each Disbursement this Period 803.73
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael J. Cunningham	Transaction ID: D250148 Date of Disbursement 10 / 27 / 2010
	Mailing Address 2007 Luzerne Avenue	Amount of Each Disbursement this Period 803.73
	City Silver Spring State MD Zip Code 20910	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1695.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) James M. Curcio</p> <p>Mailing Address 14 S. Lilburn Drive</p> <p>City Garnerville State NY Zip Code 10923</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250161</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 803.73</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) James M. Curcio</p> <p>Mailing Address 14 S. Lilburn Drive</p> <p>City Garnerville State NY Zip Code 10923</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250431</p> <p>Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 803.73</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Alexander Curtis</p> <p>Mailing Address 348 Parma View Drive</p> <p>City Hilton State NY Zip Code 14468</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247444</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 433.87</p>

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

2041.33

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



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Marina Deede	Transaction ID: D247122 Date of Disbursement 11 / 09 / 2010
	Mailing Address 242 Judith Drive	Amount of Each Disbursement this Period 426.93
	City Stormville State NY Zip Code 12582	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Christopher Deering	Transaction ID: D247163 Date of Disbursement 11 / 09 / 2010
	Mailing Address 607 Henry Street	Amount of Each Disbursement this Period 252.18
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tony Delgado	Transaction ID: D246877 Date of Disbursement 10 / 29 / 2010
	Mailing Address 550 Warren Street	Amount of Each Disbursement this Period 44.08
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	723.19
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Tony Delgado	Transaction ID: D247449 Date of Disbursement 11 / 09 / 2010
	Mailing Address 550 Warren Street	Amount of Each Disbursement this Period 174.48
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Patrick Dennis	Transaction ID: D250207 Date of Disbursement 10 / 27 / 2010
	Mailing Address 5 Parsons Road	Amount of Each Disbursement this Period 803.73
	City Kendall Park State NJ Zip Code 08824	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Patrick Dennis	Transaction ID: D250215 Date of Disbursement 11 / 10 / 2010
	Mailing Address 5 Parsons Road	Amount of Each Disbursement this Period 546.84
	City Kendall Park State NJ Zip Code 08824	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1525.05
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Amy DeSpirito	Transaction ID: D247450 Date of Disbursement 11 / 09 / 2010
	Mailing Address 478 Madison Avenue Apt 2F	Amount of Each Disbursement this Period 44.08
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amy DeSpirito	Transaction ID: D246880 Date of Disbursement 10 / 29 / 2010
	Mailing Address 478 Madison Avenue Apt 2F	Amount of Each Disbursement this Period 168.08
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anthony Dickson	Transaction ID: D246813 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1651 Howard Avenue #A2	Amount of Each Disbursement this Period 314.86
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	527.02
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anthony Dickson</p> <p>Mailing Address 1651 Howard Avenue #A2</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247164</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 110.22</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mike Digiovanni</p> <p>Mailing Address 2 Worthington Court</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247451</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 143.29</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ryan DiGiovanni</p> <p>Mailing Address 2 Worthington Ct</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247452</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 358.71</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	612.22
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ryan DiGiovanni <hr/> Mailing Address 2 Worthington Ct <hr/> City Clifton Park State NY Zip Code 12065 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D246881 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 228.75
<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah A DiRusso <hr/> Mailing Address 26 Valkill Drive <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D246882 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 434.38
<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah A DiRusso <hr/> Mailing Address 26 Valkill Drive <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247453 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 88.18

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

**751.31**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Deborah A DiRusso <hr/> Mailing Address 26 Valkill Drive <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247721 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 183.70
<b>B.</b> Full Name (Last, First, Middle Initial) John Donnelly <hr/> Mailing Address 1400 Washington Avenue <hr/> City Albany State NY Zip Code 12222 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247457 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 88.18
<b>C.</b> Full Name (Last, First, Middle Initial) John-Michael Donohue <hr/> Mailing Address 9 Terrace Avenue <hr/> City East Greenbush State NY Zip Code 12061 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247458 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 220.44

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

492.32

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) John-Michael Donohue	Transaction ID: D246884 Date of Disbursement 10 / 29 / 2010
	Mailing Address 9 Terrace Avenue	Amount of Each Disbursement this Period 88.18
	City East Greenbush State NY Zip Code 12061	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Caitlin Donovan	Transaction ID: D250432 Date of Disbursement 11 / 10 / 2010
	Mailing Address 336 Southwest 8th Street	Amount of Each Disbursement this Period 780.41
	City Oswego State NY Zip Code 13126	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Caitlin Donovan	Transaction ID: D250162 Date of Disbursement 10 / 27 / 2010
	Mailing Address 336 Southwest 8th Street	Amount of Each Disbursement this Period 780.41
	City Oswego State NY Zip Code 13126	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1649.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen Dudash  Mailing Address 53 Ridge Road  City Poughkeepsie State NY Zip Code 12603  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247123 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 36.74
<b>B.</b>	Full Name (Last, First, Middle Initial) Bryce Duncan  Mailing Address 1539 Sunset Avenue  City Utica State NY Zip Code 13501  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247165 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 330.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Bryce Duncan  Mailing Address 1539 Sunset Avenue  City Utica State NY Zip Code 13501  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246814 Date of Disbursement 10 / 29 / 2010	Amount of Each Disbursement this Period 283.52

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

650.79

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Alexander Edelman	Transaction ID: D250163 Date of Disbursement 10 / 27 / 2010
	Mailing Address 1134 Maroney Lane	Amount of Each Disbursement this Period 1310.90
	City Pacific Palisades State CA Zip Code 90272	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Alexander Edelman	Transaction ID: D250433 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1134 Maroney Lane	Amount of Each Disbursement this Period 1310.90
	City Pacific Palisades State CA Zip Code 90272	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Elkins	Transaction ID: D250219 Date of Disbursement 11 / 10 / 2010
	Mailing Address 451 Yetman Avenue	Amount of Each Disbursement this Period 236.27
	City Staten Island State NY Zip Code 10307	
	Purpose of Disbursement Wages	
	Candidate Name Michael McMahon	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2858.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kevin Elkins</p> <p>Mailing Address 451 Yetman Avenue</p> <p>City Staten Island State NY Zip Code 10307</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name Michael McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 13</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250134</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="515.54"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Feriance Ensley</p> <p>Mailing Address 1509 Oneida Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247167</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="390.26"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Seif Fakhoury</p> <p>Mailing Address 21 Caywood Lane</p> <p>City Hyde Park State NY Zip Code 12538</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247124</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="227.94"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1133.74"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Seif Fakhoury	Transaction ID: D250341 Date of Disbursement 10 / 29 / 2010
	Mailing Address 21 Caywood Lane	Amount of Each Disbursement this Period 146.96
	City Hyde Park State NY Zip Code 12538	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael F. Fayoyin	Transaction ID: D250232 Date of Disbursement 11 / 10 / 2010
	Mailing Address PO Box 50531	Amount of Each Disbursement this Period 1121.92
	City Atlanta State GA Zip Code 30302	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael F. Fayoyin	Transaction ID: D250154 Date of Disbursement 10 / 27 / 2010
	Mailing Address PO Box 50531	Amount of Each Disbursement this Period 1121.92
	City Atlanta State GA Zip Code 30302	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2390.80
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael F. Fayoyin  Mailing Address PO Box 50531  City Atlanta State GA Zip Code 30302  Purpose of Disbursement Wages Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D251654 <b>Date of Disbursement</b> 10 / 22 / 2010  Amount of Each Disbursement this Period 1057.09
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Feisdepamel  Mailing Address 22 Woodside Ave  City Colonie State NY Zip Code 12205-5440  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246886 <b>Date of Disbursement</b> 10 / 29 / 2010  Amount of Each Disbursement this Period 108.46
<b>C.</b>	Full Name (Last, First, Middle Initial) Adam Feisdepamel  Mailing Address 22 Woodside Ave  City Colonie State NY Zip Code 12205-5440  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247459 <b>Date of Disbursement</b> 11 / 09 / 2010  Amount of Each Disbursement this Period 176.36

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

1341.91

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jared Fishedick</p> <p>Mailing Address 1374 Broadway Avenue</p> <p>City Holbrook State NY Zip Code 11741</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250216</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="617.08"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jared Fishedick</p> <p>Mailing Address 1374 Broadway Avenue</p> <p>City Holbrook State NY Zip Code 11741</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250208</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="921.77"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Denis Fitzgerald</p> <p>Mailing Address 367 Mills Road Cross Road</p> <p>City Staatsburg State NY Zip Code 12580</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247461</p> <p>Date of Disbursement</p> <p><input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="267.85"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) James Fitzpatrick</p> <p>Mailing Address 445 Jackson Street</p> <p>City Oceanside State NY Zip Code 11572</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247722</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="156.14"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brian Floss</p> <p>Mailing Address 830 Myrle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247723</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="330.45"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brian Floss</p> <p>Mailing Address 830 Myrle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247463</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="203.91"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="690.50"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Brian Floss	Transaction ID: D246887
	Mailing Address 830 Myrle Avenue	Date of Disbursement 10 / 29 / 2010
	City Albany State NY Zip Code 12208	Amount of Each Disbursement this Period 333.59
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fosters' Tents	Transaction ID: D250966
	Mailing Address 267 Fournier Road	Date of Disbursement 11 / 10 / 2010
	City West Chazy State NY Zip Code 12992	Amount of Each Disbursement this Period 205.20
	Purpose of Disbursement Press Risers for Election Night	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer Free	Transaction ID: D247168
	Mailing Address 1657 West Street	Date of Disbursement 11 / 09 / 2010
	City Utica State NY Zip Code 13501	Amount of Each Disbursement this Period 330.53
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>869.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Horiesha Freeman <hr/> Mailing Address 326 Mary Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247169 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 299.19
B.	Full Name (Last, First, Middle Initial) Horiesha Freeman <hr/> Mailing Address 326 Mary Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246815 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 219.71
C.	Full Name (Last, First, Middle Initial) Sam Frumkin <hr/> Mailing Address 801 N. Tioga Street <hr/> City Ithaca State NY Zip Code 14850 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247464 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 258.44

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	777.34
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Fullam  Mailing Address 347 Hudson Avenue  City Albany State NY Zip Code 12210  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247465 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 88.18
<b>B.</b>	Full Name (Last, First, Middle Initial) Amy Gardiner  Mailing Address 395 Quail Street  City Albany State NY Zip Code 12208  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247466 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 203.91
<b>C.</b>	Full Name (Last, First, Middle Initial) Evelyn Gaston  Mailing Address 1558 Elm Street, Apt. 2  City Utica State NY Zip Code 13501  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247170 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 360.92

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

653.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Joseph Gaylord	Transaction ID: D250438 Date of Disbursement 11 / 10 / 2010
	Mailing Address 11 Widlerness Lane	Amount of Each Disbursement this Period 780.41
	City Valatie State NY Zip Code 12184	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joseph Gaylord	Transaction ID: D250195 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11 Widlerness Lane	Amount of Each Disbursement this Period 780.41
	City Valatie State NY Zip Code 12184	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Shomik Ghosh	Transaction ID: D247467 Date of Disbursement 11 / 09 / 2010
	Mailing Address 9 Jonathans Landing	Amount of Each Disbursement this Period 433.87
	City Madison State CT Zip Code 06443	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1994.69
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Jim Giugno Mailing Address 95 Spectacle Pond Road City Littleton State MA Zip Code 01460 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247468 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 278.62
B.	Full Name (Last, First, Middle Initial) Jim Giugno Mailing Address 95 Spectacle Pond Road City Littleton State MA Zip Code 01460 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247726 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 309.25
C.	Full Name (Last, First, Middle Initial) Jim Giugno Mailing Address 95 Spectacle Pond Road City Littleton State MA Zip Code 01460 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246889 Date of Disbursement 10 / 29 / 2010	Amount of Each Disbursement this Period 242.60

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>830.47</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sean D. Glendening <hr/> Mailing Address 9 Woodland Drive <hr/> City Campbell Hall State NY Zip Code 10916 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247125 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 146.96
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Global Strategy Group, LLC <hr/> Mailing Address 895 Broadway <hr/> City New York State NY Zip Code 10003-1226 <hr/> Purpose of Disbursement Polling Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 13334.62
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) David Gottlieb <hr/> Mailing Address 211 Ontario Street <hr/> City Albany State NY Zip Code 12203 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247469 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 132.26
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13613.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Colby Graves	Transaction ID: D247470 Date of Disbursement 11 / 09 / 2010
	Mailing Address 30 Latinville Drive	Amount of Each Disbursement this Period 478.13
	City Plattsburgh State NY Zip Code 12901	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Colby Graves	Transaction ID: D246901 Date of Disbursement 10 / 29 / 2010
	Mailing Address 30 Latinville Drive	Amount of Each Disbursement this Period 377.45
	City Plattsburgh State NY Zip Code 12901	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Elizabeth Gray	Transaction ID: D247471 Date of Disbursement 11 / 09 / 2010
	Mailing Address 135 Lancaster Street, Apt. 1	Amount of Each Disbursement this Period 433.87
	City Albany State NY Zip Code 12210	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1289.45
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Junious R. Green</p> <p>Mailing Address 105 Parker Avenue</p> <p>City Poughkeepsie State NY Zip Code 12601</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247472</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.60"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ariel Habib</p> <p>Mailing Address 8 Fox Den Lane</p> <p>City North Salem State NY Zip Code 10560</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247473</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="275.85"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ariel Habib</p> <p>Mailing Address 8 Fox Den Lane</p> <p>City North Salem State NY Zip Code 10560</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247733</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="194.44"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="712.89"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Eva Hagan	Transaction ID: D247474 Date of Disbursement 11 / 09 / 2010
	Mailing Address 815 North Broadway, #933	Amount of Each Disbursement this Period 60.62
	City Saratoga Springs State NY Zip Code 12866	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Ken Hahn	Transaction ID: D247475 Date of Disbursement 11 / 09 / 2010
	Mailing Address 241 Scenic Drive	Amount of Each Disbursement this Period 132.26
	City Haganman State NY Zip Code 12086	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Matthew Halpern	Transaction ID: D247476 Date of Disbursement 11 / 09 / 2010
	Mailing Address 197 Schlueter Drive	Amount of Each Disbursement this Period 110.22
	City Hopewell Junction State NY Zip Code 12533	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>303.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Julie Hamacher</p> <p>Mailing Address 607 Henry Street, Apt. 2</p> <p>City Utica State NY Zip Code 13502</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247172</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="283.52"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Finley Harckham</p> <p>Mailing Address 28 Irvine Rd.</p> <p>City Old Greenwich State CT Zip Code 06870</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250149</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Finley Harckham</p> <p>Mailing Address 28 Irvine Rd.</p> <p>City Old Greenwich State CT Zip Code 06870</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250228</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1844.34"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Kyle Hauk</p> <p>Mailing Address 830 Myrtle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246893</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 273.08</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Kyle Hauk</p> <p>Mailing Address 830 Myrtle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247477</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 259.23</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kyle Hauk</p> <p>Mailing Address 830 Myrtle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247739</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 148.34</p>

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

680.65

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andre Headley</p> <p>Mailing Address 25 Kovac Lane</p> <p>City Pleasant Valley State NY Zip Code 12569</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247478</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 66.14</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lester Henderson</p> <p>Mailing Address 2 Kennedy Plaza, Apt. 507</p> <p>City Utica State NY Zip Code 13502</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247173</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 330.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amanda Hennenberry</p> <p>Mailing Address 78 Keats Drive</p> <p>City New Windsor State NY Zip Code 12553</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246894</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 264.76</p>

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

661.43

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Amanda Hennenberry Mailing Address 78 Keats Drive City New Windsor State NY Zip Code 12553 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247479 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 307.93
B.	Full Name (Last, First, Middle Initial) Lorenzo Hernandez Mailing Address 69 Irene Drive City Clifton Park State NY Zip Code 12065 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247480 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 88.18
C.	Full Name (Last, First, Middle Initial) Kathleen Herr-Evers Mailing Address 34 Chestnut Street City Huntington State NY Zip Code 11743 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250210 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 524.05

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	920.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Kathleen Herr-Evers

Transaction ID: D250127  
Date of Disbursement

Mailing Address 34 Chestnut Street

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

City State Zip Code  
Huntington NY 11743

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wages

780.41
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Kevin S Herrera

Transaction ID: D246793  
Date of Disbursement

Mailing Address 210 Washington Avenue

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

City State Zip Code  
Tappan NY 10983

Amount of Each Disbursement this Period

Purpose of Disbursement  
GOTV Canvassing

220.44
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Kevin S Herrera

Transaction ID: D247126  
Date of Disbursement

Mailing Address 210 Washington Avenue

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

City State Zip Code  
Tappan NY 10983

Amount of Each Disbursement this Period

Purpose of Disbursement  
GOTV Canvassing

73.48
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1074.33
---------

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) John B. Hill	Transaction ID: D251636 Date of Disbursement 10 / 27 / 2010
	Mailing Address 2 Alfred Road W.	Amount of Each Disbursement this Period 974.64
	City Merrick State NY Zip Code 11566	
	Purpose of Disbursement Wages Candidate Name Michael McMahon Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) John B. Hill	Transaction ID: D251638 Date of Disbursement 11 / 10 / 2010
	Mailing Address 2 Alfred Road W.	Amount of Each Disbursement this Period 453.65
	City Merrick State NY Zip Code 11566	
	Purpose of Disbursement Wages Candidate Name Michael McMahon Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Gabe Holmes	Transaction ID: D247481 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1529 Grenoside Avenue	Amount of Each Disbursement this Period 77.15
	City Schenectady State NY Zip Code 12309	
	Purpose of Disbursement GOTV Canvassing Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1505.44
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Richard J. Horner, Jr.	Transaction ID: D251504 Date of Disbursement 10 / 27 / 2010
	Mailing Address 767 Mineral Springs Rd.	Amount of Each Disbursement this Period 2156.49
	City West Seneca State NY Zip Code 14224	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Richard J. Horner, Jr.	Transaction ID: D251728 Date of Disbursement 11 / 10 / 2010
	Mailing Address 767 Mineral Springs Rd.	Amount of Each Disbursement this Period 2156.49
	City West Seneca State NY Zip Code 14224	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Patricia Insogna	Transaction ID: D247482 Date of Disbursement 11 / 09 / 2010
	Mailing Address 241 Scenic Drive	Amount of Each Disbursement this Period 132.26
	City Hagaman State NY Zip Code 12086	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	4445.24
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Carl Jackson	Transaction ID: D247175 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1505 Whitesboro Street	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Carl Jackson	Transaction ID: D246816 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1505 Whitesboro Street	Amount of Each Disbursement this Period 283.52
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Cody Jackson	Transaction ID: D247127 Date of Disbursement 11 / 09 / 2010
	Mailing Address 317 Main Street	Amount of Each Disbursement this Period 55.11
	City Beacon State NY Zip Code 12508	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>787.57</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Allen Jefferson	Transaction ID: D247176 Date of Disbursement 11 / 09 / 2010
	Mailing Address 10 Downer Avenue	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Allen Jefferson	Transaction ID: D247177 Date of Disbursement 11 / 09 / 2010
	Mailing Address 10 Downer Avenue	Amount of Each Disbursement this Period 219.71
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jerrold Jefferson	Transaction ID: D247178 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1235 Steuben Street	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1117.59
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Jerrold Jefferson <hr/> Mailing Address 1235 Steuben Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246818 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 314.86
B.	Full Name (Last, First, Middle Initial) Willie Jefferson <hr/> Mailing Address 1651 Neilson Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246820 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 283.52
C.	Full Name (Last, First, Middle Initial) Willie Jefferson <hr/> Mailing Address 1651 Neilson Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247179 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 73.48

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

671.86

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) James Johnson	Transaction ID: D247180 Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 410 West Thomas Street	Amount of Each Disbursement this Period 299.19
	City Rome State NY Zip Code 13440	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) James Johnson	Transaction ID: D246821 Date of Disbursement MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 410 West Thomas Street	Amount of Each Disbursement this Period 146.96
	City Rome State NY Zip Code 13440	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joseph Johnson	Transaction ID: D246823 Date of Disbursement MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 1307 Blandina Street	Amount of Each Disbursement this Period 110.22
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>556.37</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joseph Johnson</p> <p>Mailing Address 1307 Blandina Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247181</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="219.71"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Melissa Jones</p> <p>Mailing Address 364 Platt Hill Rd</p> <p>City Winsted State CT Zip Code 06098</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250439</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Melissa Jones</p> <p>Mailing Address 364 Platt Hill Rd</p> <p>City Winsted State CT Zip Code 06098</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250196</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1780.53"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Sylvanus Jones	Transaction ID: D247182 Date of Disbursement 11 / 09 / 2010
	Mailing Address 5722 Trenton Road	Amount of Each Disbursement this Period 419.60
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sylvanus Jones	Transaction ID: D246824 Date of Disbursement 10 / 29 / 2010
	Mailing Address 5722 Trenton Road	Amount of Each Disbursement this Period 183.70
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Valerie Kalmatskya	Transaction ID: D246895 Date of Disbursement 10 / 29 / 2010
	Mailing Address 114 Main Street Apt #301	Amount of Each Disbursement this Period 132.26
	City New Paltz State NY Zip Code 12561	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>735.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Valerie Kalmatskya	Transaction ID: D247483 Date of Disbursement 11 / 09 / 2010
	Mailing Address 114 Main Street Apt #301	Amount of Each Disbursement this Period 44.08
	City New Paltz State NY Zip Code 12561	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Danyelle Kampf	Transaction ID: D247183 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1509 Oneida Street	Amount of Each Disbursement this Period 390.26
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Haynes Kanyike	Transaction ID: D247128 Date of Disbursement 11 / 09 / 2010
	Mailing Address 57 Cannon Street, Apt. 524	Amount of Each Disbursement this Period 36.74
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>471.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tendo Kanyike <hr/> Mailing Address 57 Cannon Street <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247129 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 174.51
<b>B.</b> Full Name (Last, First, Middle Initial) Tendo Kanyike <hr/> Mailing Address 57 Cannon Street <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246795 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 73.48
<b>C.</b> Full Name (Last, First, Middle Initial) Ryan Kelly <hr/> Mailing Address 1505 Whitesboro Street <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247184 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 219.71

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

467.70

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Keough</p> <hr/> <p>Mailing Address 7 Brook Lane</p> <hr/> <p>City State Zip Code New City NY 10956</p> <hr/> <p>Purpose of Disbursement GOTV Canvassing</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto; margin-right: auto;"></div> <p style="text-align: center; font-size: small;">Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246896</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <p>1 0 / 2 9 / 2 0 1 0</p> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: center;">289.63</div>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Keough</p> <hr/> <p>Mailing Address 7 Brook Lane</p> <hr/> <p>City State Zip Code New City NY 10956</p> <hr/> <p>Purpose of Disbursement GOTV Canvassing</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto; margin-right: auto;"></div> <p style="text-align: center; font-size: small;">Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247484</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <p>1 1 / 0 9 / 2 0 1 0</p> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: center;">276.52</div>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Keough</p> <hr/> <p>Mailing Address 7 Brook Lane</p> <hr/> <p>City State Zip Code New City NY 10956</p> <hr/> <p>Purpose of Disbursement GOTV Canvassing</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto; margin-right: auto;"></div> <p style="text-align: center; font-size: small;">Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247740</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <p>1 0 / 1 5 / 2 0 1 0</p> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: center;">273.62</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px; display: inline-block;">839.77</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> </div>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Josh Kern</p> <p>Mailing Address P.O. Box 2390</p> <p>City Avon State CO Zip Code 81620</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247486</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="187.37"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Arona Kessler</p> <p>Mailing Address 5 Lenore Court</p> <p>City Port Jefferson Sta State NY Zip Code 11776</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250128</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Arona Kessler</p> <p>Mailing Address 5 Lenore Court</p> <p>City Port Jefferson Sta State NY Zip Code 11776</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250211</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="524.05"/></p>

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dante King <hr/> Mailing Address 1531 Howard Avenue <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D246826 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 346.20
<b>B.</b>	Full Name (Last, First, Middle Initial) Dante King <hr/> Mailing Address 1531 Howard Avenue <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D247185 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 183.70
<b>C.</b>	Full Name (Last, First, Middle Initial) Darlene King <hr/> Mailing Address 301 Elizabeth Street Apt 1 <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> 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:	Transaction ID: D246828 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 183.70

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	713.60
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Ronald King	Transaction ID: D247488 Date of Disbursement 11 / 09 / 2010
	Mailing Address 32 N. Hamilton Street, Apt. 2	Amount of Each Disbursement this Period 352.11
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Stephanie King	Transaction ID: D246829 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1531 Howard Avenue	Amount of Each Disbursement this Period 346.20
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Stephanie King	Transaction ID: D247186 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1531 Howard Avenue	Amount of Each Disbursement this Period 448.94
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1147.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Bradley Komar	Transaction ID: D250233 Date of Disbursement 11 / 10 / 2010
	Mailing Address 2349 Tall Sall Drive, Apt. C	Amount of Each Disbursement this Period 1424.42
	City Charleston State SC Zip Code 29414	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bradley Komar	Transaction ID: D250155 Date of Disbursement 10 / 27 / 2010
	Mailing Address 2349 Tall Sall Drive, Apt. C	Amount of Each Disbursement this Period 1424.42
	City Charleston State SC Zip Code 29414	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rakhee Kulkarni	Transaction ID: D250129 Date of Disbursement 10 / 27 / 2010
	Mailing Address 7 Blossom Street	Amount of Each Disbursement this Period 803.73
	City Dix Hills State NY Zip Code 11746	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3652.57</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rakhee Kulkarni</p> <p>Mailing Address 7 Blossom Street</p> <p>City Dix Hills State NY Zip Code 11746</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250212</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="546.84"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nikhil Kumar</p> <p>Mailing Address 23 Robinwood Drive</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250197</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nikhil Kumar</p> <p>Mailing Address 23 Robinwood Drive</p> <p>City Clifton Park State NY Zip Code 12065</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250441</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2107.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Dan Lafave

Transaction ID: D247489  
Date of Disbursement

Mailing Address 224 St. Lawrence Avenue West

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

City State Zip Code  
Brownville NY 13615

Amount of Each Disbursement this Period

176.36
--------

Purpose of Disbursement  
GOTV Canvassing

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Colin Lafferty

Transaction ID: D246835  
Date of Disbursement

Mailing Address 5780 Morris Road

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

City State Zip Code  
Marcy NY 13403

Amount of Each Disbursement this Period

73.48
-------

Purpose of Disbursement  
GOTV Canvassing

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
James LaGrutta

Transaction ID: D246897  
Date of Disbursement

Mailing Address 515 Loudon Road  
SPOB

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

City State Zip Code  
Loudonville NY 12211

Amount of Each Disbursement this Period

97.32
-------

Purpose of Disbursement  
GOTV Canvassing

Category/Type
---------------

Candidate Name

Category/Type
---------------

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

347.16
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) James LaGrutta  Mailing Address 515 Loudon Road SPOB  City Loudonville State NY Zip Code 12211  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247490 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 140.52
B.	Full Name (Last, First, Middle Initial) James LaGrutta  Mailing Address 515 Loudon Road SPOB  City Loudonville State NY Zip Code 12211  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247743 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period 119.40
C.	Full Name (Last, First, Middle Initial) Jose LaSanta  Mailing Address 128 Lynch Avenue  City Utica State NY Zip Code 13501  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246840 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 183.70

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

443.62

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jillian Lear  Mailing Address 8 Regal Drive  City Merrimack State NH Zip Code 03054  Purpose of Disbursement GOTV Canvassing  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247130 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 36.74
<b>B.</b>	Full Name (Last, First, Middle Initial) Ruben Leavitt  Mailing Address 17 Lido Blvd.  City Long Beach State NY Zip Code 11561  Purpose of Disbursement Wages  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250156 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 780.41
<b>C.</b>	Full Name (Last, First, Middle Initial) Ruben Leavitt  Mailing Address 17 Lido Blvd.  City Long Beach State NY Zip Code 11561  Purpose of Disbursement Wages  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250427 Date of Disbursement 11 / 10 / 2010  Amount of Each Disbursement this Period 780.41

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

1597.56

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Erica Lemley  Mailing Address 1520 Nott Street, Apt. B  City Schenectady State NY Zip Code 12308  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247491 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 132.26
B.	Full Name (Last, First, Middle Initial) Alex Lessard  Mailing Address 5 Crimson Court  City Clifton Park State NY Zip Code 12065  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247492 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 147.70
C.	Full Name (Last, First, Middle Initial) Samantha Liles  Mailing Address 44 S. Park Avenue, Apt. 1  City Albany State NY Zip Code 12202  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247493 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 225.98

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

**505.94**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Long <hr/> Mailing Address 12 Dewey Rd. <hr/> City Commack State NY Zip Code 11725 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247494 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 262.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Long <hr/> Mailing Address 12 Dewey Rd. <hr/> City Commack State NY Zip Code 11725 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247746 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 297.86
<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Long <hr/> Mailing Address 12 Dewey Rd. <hr/> City Commack State NY Zip Code 11725 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D246898 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 474.53

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

1034.39

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Regina Lucas</p> <p>Mailing Address 1 Schnabl Court</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247131</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="404.42"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard C. Lucas</p> <p>Mailing Address 1 Schnabl Court</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247133</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="346.20"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Leslie B MacConnell</p> <p>Mailing Address 25 Probst Terrace</p> <p>City Hopewell Junction State NY Zip Code 12533</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246899</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="431.73"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Leslie B MacConnell  Mailing Address 25 Probst Terrace  City Hopewell Junction State NY Zip Code 12533  Purpose of Disbursement GOTV Canvassing  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247495 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period  561.29
<b>B.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC  Mailing Address 2001 N. Beauregard Street, Suite 4  City Alexandria State VA Zip Code 22311  Purpose of Disbursement State Walkcard  Candidate Name John Hall  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D243102 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	Amount of Each Disbursement this Period  7000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC  Mailing Address 2001 N. Beauregard Street, Suite 4  City Alexandria State VA Zip Code 22311  Purpose of Disbursement Exempt Mail-Hall  Candidate Name John Hall  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250513 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	Amount of Each Disbursement this Period  32847.30

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>40408.59</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC  Mailing Address 2001 N. Beauregard Street, Suite 4  City Alexandria State VA Zip Code 22311  Purpose of Disbursement Exempt Mail-Hall  Candidate Name John Hall  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250514 Date of Disbursement 10 / 18 / 2010  Amount of Each Disbursement this Period 79037.12	
<b>B.</b>	Full Name (Last, First, Middle Initial) Mack Crouse Group, LLC  Mailing Address 2001 N. Beauregard Street, Suite 4  City Alexandria State VA Zip Code 22311  Purpose of Disbursement Exempt Mail-Hall  Candidate Name John Hall  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250515 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 18140.20	
<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Marchese  Mailing Address 168 Colonial Avenue  City Albany State NY Zip Code 12208  Purpose of Disbursement GOTV Canvassing  Candidate Name   Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247499 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 44.08	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	97221.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Marchese</p> <p>Mailing Address 168 Colonial Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246900 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 176.36</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Francis Marchio</p> <p>Mailing Address 141 Valley View Road</p> <p>City New Hartford State NY Zip Code 13413</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246842 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 73.48</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Katherine Maretz</p> <p>Mailing Address 88 Scott Drive</p> <p>City Wappingers Falls State NY Zip Code 12590</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247500 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 409.33</p>

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

659.17

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Katherine Maretz <hr/> Mailing Address 88 Scott Drive <hr/> City Wappingers Falls State NY Zip Code 12590 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246902 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 298.40
<b>B.</b>	Full Name (Last, First, Middle Initial) Stephanie Maretz <hr/> Mailing Address 88 Scott Drive <hr/> City Wappingers Falls State NY Zip Code 12590 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246903 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 308.70
<b>C.</b>	Full Name (Last, First, Middle Initial) Stephanie Maretz <hr/> Mailing Address 88 Scott Drive <hr/> City Wappingers Falls State NY Zip Code 12590 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247501 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 520.74

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

1127.84

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jennifer Martin</p> <p>Mailing Address 6707 Fox Rd</p> <p>City Marcy State NY Zip Code 13403</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250442</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1080.11"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jennifer Martin</p> <p>Mailing Address 6707 Fox Rd</p> <p>City Marcy State NY Zip Code 13403</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250198</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1080.11"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Scott Matthews</p> <p>Mailing Address 404 Route 189</p> <p>City Churubusco State NY Zip Code 12923</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250164</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott Matthews</p> <p>Mailing Address 404 Route 189</p> <p>City Churubusco State NY Zip Code 12923</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250434</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elizabeth S. McKenna</p> <p>Mailing Address 24 Ausaroar Way</p> <p>City Lake Placid State NY Zip Code 12946</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250331</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth S. McKenna</p> <p>Mailing Address 24 Ausaroar Way</p> <p>City Lake Placid State NY Zip Code 12946</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250443</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="780.41"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2341.23"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Seamus McKenna</p> <p>Mailing Address 830 Myrtle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247502 <b>Date of Disbursement:</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 159.82</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Seamus McKenna</p> <p>Mailing Address 830 Myrtle Avenue</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246904 <b>Date of Disbursement:</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 194.76</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John McLean</p> <p>Mailing Address 1400 Washington Avenue University of Albany</p> <p>City Albany State NY Zip Code 12222</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247503 <b>Date of Disbursement:</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 38.58</p>

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

393.16

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Danielle McMullen</p> <p>Mailing Address 6 Elman Street</p> <p>City Broadalbin State NY Zip Code 12025</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250445</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Danielle McMullen</p> <p>Mailing Address 6 Elman Street</p> <p>City Broadalbin State NY Zip Code 12025</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250200</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="803.73"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Aubrey Menard</p> <p>Mailing Address 111 Lancaster Street, #1</p> <p>City Albany State NY Zip Code 12210</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247498</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="433.87"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="2041.33"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A.**

Full Name (Last, First, Middle Initial)  
Erik T Mercado

**Transaction ID:** D247504  
**Date of Disbursement**

Mailing Address 22 D Janet Drive

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 0	<sup>D</sup> 9	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 1	<sup>Y</sup> 0
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City Poughkeepsie State NY Zip Code 12603

Amount of Each Disbursement this Period

422.53
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Purpose of Disbursement  
GOTV Canvassing

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Steven Miele

**Transaction ID:** D247135  
**Date of Disbursement**

Mailing Address 122 Seaman Road

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 0	<sup>D</sup> 9	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 1	<sup>Y</sup> 0
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City Stormville State NY Zip Code 12582

Amount of Each Disbursement this Period

110.22
--------

Purpose of Disbursement  
GOTV Canvassing

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Miglucci

**Transaction ID:** D247747  
**Date of Disbursement**

Mailing Address 428 5th Avenue

<sup>M</sup> 1	<sup>M</sup> 0	/	<sup>D</sup> 1	<sup>D</sup> 5	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 1	<sup>Y</sup> 0
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City Watervliet State NY Zip Code 12189

Amount of Each Disbursement this Period

146.96
--------

Purpose of Disbursement  
GOTV Canvassing

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

679.71
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**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Kyle Miglucci	Transaction ID: D250804 Date of Disbursement 10 / 15 / 2010
	Mailing Address 428 5th Avenue	Amount of Each Disbursement this Period 64.29
	City Watervliet State NY Zip Code 12189	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Katie Miller	Transaction ID: D246906 Date of Disbursement 10 / 29 / 2010
	Mailing Address 490 Waterbury Road	Amount of Each Disbursement this Period 165.33
	City Nassau State NY Zip Code 12123	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Katie Miller	Transaction ID: D247505 Date of Disbursement 11 / 09 / 2010
	Mailing Address 490 Waterbury Road	Amount of Each Disbursement this Period 143.29
	City Nassau State NY Zip Code 12123	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>372.91</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Megan Miraglia	Transaction ID: D250447 Date of Disbursement 11 / 10 / 2010
	Mailing Address 4852 Prospect Avenue	Amount of Each Disbursement this Period 780.41
	City Cincinnati State OH Zip Code 45242	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	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:	

B.	Full Name (Last, First, Middle Initial) Megan Miraglia	Transaction ID: D250201 Date of Disbursement 10 / 27 / 2010
	Mailing Address 4852 Prospect Avenue	Amount of Each Disbursement this Period 780.41
	City Cincinnati State OH Zip Code 45242	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250502 Date of Disbursement 10 / 25 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 67682.56
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Bishop	
	Candidate Name Timothy Bishop	Category/Type
	Office Sought: <input checked="" 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: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>69243.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250503 Date of Disbursement 10 / 19 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 105215.02
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Bishop	Category/Type
	Candidate Name Timothy Bishop	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250504 Date of Disbursement 10 / 29 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 50000.00
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Bishop	Category/Type
	Candidate Name Timothy Bishop	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250929 Date of Disbursement 11 / 01 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 23665.26
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Bishop	Category/Type
	Candidate Name Timothy Bishop	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	178880.28
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250525 Date of Disbursement 10 / 26 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 16000.00
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Owens	Category/Type
	Candidate Name Bill Owens	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250530 Date of Disbursement 10 / 22 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 96700.54
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Murphy	Category/Type
	Candidate Name Scott Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250532 Date of Disbursement 10 / 29 / 2010
	Mailing Address 114 A Mansfield Hollow Rd.	Amount of Each Disbursement this Period 25000.00
	City Mansfield Center State CT Zip Code 06250	
	Purpose of Disbursement Exempt Mail-Murphy	Category/Type
	Candidate Name Scott Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	137700.54
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250535 Date of Disbursement
	Mailing Address 114 A Mansfield Hollow Rd.	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mansfield Center State CT Zip Code 06250	Amount of Each Disbursement this Period
	Purpose of Disbursement Exempt Mail-Maffei	<input type="text" value="65488.71"/>
	Candidate Name Dan Maffei	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250538 Date of Disbursement
	Mailing Address 114 A Mansfield Hollow Rd.	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mansfield Center State CT Zip Code 06250	Amount of Each Disbursement this Period
	Purpose of Disbursement Exempt Mail	<input type="text" value="236292.96"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mission Control, Inc.	Transaction ID: D250969 Date of Disbursement
	Mailing Address 114 A Mansfield Hollow Rd.	<input type="text" value="11"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mansfield Center State CT Zip Code 06250	Amount of Each Disbursement this Period
	Purpose of Disbursement Exempt Mail-Murphy	<input type="text" value="70000.00"/>
	Candidate Name Scott Murphy	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="371781.67"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Maffei</p> <p>Candidate Name Dan Maffei</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 25</p>	<p><b>Transaction ID:</b> D250972</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 42525.98</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Bishop</p> <p>Candidate Name Timothy Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 01</p>	<p><b>Transaction ID:</b> D251992</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 12198.90</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Owens</p> <p>Candidate Name Bill Owens</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p>	<p><b>Transaction ID:</b> D252001</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 24300.04</p>

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

79024.92

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mission Control, Inc.</p> <p>Mailing Address 114 A Mansfield Hollow Rd.</p> <p>City Mansfield Center State CT Zip Code 06250</p> <p>Purpose of Disbursement Exempt Mail-Murphy</p> <p>Candidate Name Scott Murphy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p>	<p><b>Transaction ID:</b> D252007</p> <p>Date of Disbursement 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 27518.60</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lolice Mitchell</p> <p>Mailing Address 20 High Street, Apt. 2</p> <p>City Poughkeepsie State NY Zip Code 12601</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D247506</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 93.69</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rashan Mitchell</p> <p>Mailing Address 46 Smith Street, Apt. #1</p> <p>City Poughkeepsie State NY Zip Code 12601</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D247507</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 93.69</p>

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

27705.98

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Galo Moldanado	Transaction ID: D247137 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1 Woods Road	Amount of Each Disbursement this Period 73.48
	City Valley Cottage State NY Zip Code 10989	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Galo Moldanado	Transaction ID: D246796 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1 Woods Road	Amount of Each Disbursement this Period 73.48
	City Valley Cottage State NY Zip Code 10989	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Alaina Mormile	Transaction ID: D247508 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1163 Coplon Avenue	Amount of Each Disbursement this Period 370.40
	City Schenectady State NY Zip Code 12309	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>517.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Alaina Mormile Mailing Address 1163 Coplon Avenue City Schenectady State NY Zip Code 12309 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246907 <b>Date of Disbursement</b> 10 / 29 / 2010	Amount of Each Disbursement this Period 245.38
<b>B.</b>	Full Name (Last, First, Middle Initial) Ashley Moss Mailing Address 13612 sheepshead Court City Clarksville State MD Zip Code 21029 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250458 <b>Date of Disbursement</b> 11 / 10 / 2010	Amount of Each Disbursement this Period 803.73
<b>C.</b>	Full Name (Last, First, Middle Initial) Ashley Moss Mailing Address 13612 sheepshead Court City Clarksville State MD Zip Code 21029 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250202 <b>Date of Disbursement</b> 10 / 27 / 2010	Amount of Each Disbursement this Period 1246.07

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2295.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) National Telecommunications Services, Inc.</p> <p>Mailing Address 122 C Street, NW, #640</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Automated Robocalls-Generic</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251001</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57867.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jimmy Nelson</p> <p>Mailing Address 621 Tracy Street Apt 4</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246844</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="346.20"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jimmy Nelson</p> <p>Mailing Address 621 Tracy Street Apt 4</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247187</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="360.92"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="58574.12"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Tishyla Nelson	Transaction ID: D247139 Date of Disbursement 11 / 09 / 2010
	Mailing Address 2- Red Barn Lane	Amount of Each Disbursement this Period 192.88
	City Middletown State NY Zip Code 10940	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jason O'Brien	Transaction ID: D247140 Date of Disbursement 11 / 09 / 2010
	Mailing Address 252 Florida Hill Road	Amount of Each Disbursement this Period 110.22
	City Ridgefield State CT Zip Code 06877	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Martin O'Hanlon	Transaction ID: D246908 Date of Disbursement 10 / 29 / 2010
	Mailing Address 12 Beverly Road	Amount of Each Disbursement this Period 82.66
	City Cortlandt Manor State NY Zip Code 10567	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	385.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Martin O'Hanlon <hr/> Mailing Address 12 Beverly Road <hr/> City Cortlandt Manor State NY Zip Code 10567 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247757 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 112.97
<b>B.</b>	Full Name (Last, First, Middle Initial) Martin O'Hanlon <hr/> Mailing Address 12 Beverly Road <hr/> City Cortlandt Manor State NY Zip Code 10567 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247509 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 135.02
<b>C.</b>	Full Name (Last, First, Middle Initial) Joey O'Rourke <hr/> Mailing Address 64 Legenbauer Road <hr/> City Averill Park State NY Zip Code 12018 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247510 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 46.84

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

294.83

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) John Ogle	Transaction ID: D247758 Date of Disbursement 10 / 15 / 2010
	Mailing Address 84 Jenkins Road	Amount of Each Disbursement this Period 238.91
	City Burnt Hills State NY Zip Code 12027	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Zachary Olsavicky	Transaction ID: D247511 Date of Disbursement 11 / 09 / 2010
	Mailing Address 104 Southbury Road	Amount of Each Disbursement this Period 322.03
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Annette Owens	Transaction ID: D247512 Date of Disbursement 11 / 09 / 2010
	Mailing Address 614A Clifton Park Center Road	Amount of Each Disbursement this Period 88.18
	City Clifton Park State NY Zip Code 12065	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	649.12
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Oxford Health Plans  Mailing Address P.O. Box 1697  City Newark State NJ Zip Code 07101-1697  Purpose of Disbursement Health Insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D252098 Date of Disbursement 11 / 05 / 2010  Amount of Each Disbursement this Period 1314.98  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Oxford Health Plans  Mailing Address P.O. Box 1697  City Newark State NJ Zip Code 07101-1697  Purpose of Disbursement Health Insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D252099 Date of Disbursement 11 / 05 / 2010  Amount of Each Disbursement this Period 657.49  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Sean Pansa  Mailing Address 11 Avery Place  City Utica State NY Zip Code 13502  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247703 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 36.74  Category/Type

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

2009.21

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Sean Pansa Mailing Address 11 Avery Place City Utica State NY Zip Code 13502 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247188 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 330.53
B.	Full Name (Last, First, Middle Initial) Dan Paradeis Mailing Address PO Box 243 City Clintondale State NY Zip Code 12515 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247513 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 121.25
C.	Full Name (Last, First, Middle Initial) Dan Paradeis Mailing Address PO Box 243 City Clintondale State NY Zip Code 12515 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247761 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 38.30

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

490.08

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Dan Paradeis	Transaction ID: D246909 Date of Disbursement 10 / 29 / 2010
	Mailing Address PO Box 243	Amount of Each Disbursement this Period 292.87
	City Clintondale State NY Zip Code 12515	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Heather Parry	Transaction ID: D247708 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1018 West Street	Amount of Each Disbursement this Period 73.48
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251901 Date of Disbursement 10 / 27 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2500.41
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2866.76
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251904 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="2391.83"/>
	Candidate Name	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251887 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="5937.12"/>
	Candidate Name	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251894 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="3524.97"/>
	Candidate Name	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11853.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251896 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="27"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="2429.71"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251898 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="27"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="3343.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251926 Date of Disbursement
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	<input type="text" value="10"/> <input type="text" value="M"/> / <input type="text" value="29"/> <input type="text" value="D"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes/Withholdings	<input type="text" value="2009.57"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251928 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1931.33
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252101 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 793.97
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252068 Date of Disbursement 10 / 15 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1122.26
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3847.56
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D252069 Date of Disbursement 10 / 22 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 474.55
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251922 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 330.31
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251908 Date of Disbursement 10 / 27 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 4422.43
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5227.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251936 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 6069.70
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251938 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 1109.69
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251939 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 788.59
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7967.98</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251940 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2302.15
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251942 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2197.98
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: D251944 Date of Disbursement 11 / 10 / 2010
	Mailing Address 1551 S. Washington Ave., P.O. Box 1180	Amount of Each Disbursement this Period 2389.55
	City Piscataway State NJ Zip Code 08854	
	Purpose of Disbursement Payroll Taxes/Withholdings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6889.68</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 1551 S. Washington Ave., P.O. Box 1180 <hr/> City Piscataway State NJ Zip Code 08854 <hr/> Purpose of Disbursement Payroll Taxes/Withholdings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D251945 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 4152.45
<b>B.</b>	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 1551 S. Washington Ave., P.O. Box 1180 <hr/> City Piscataway State NJ Zip Code 08854 <hr/> Purpose of Disbursement Payroll Taxes/Withholdings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D251946 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 5786.79
<b>C.</b>	Full Name (Last, First, Middle Initial) PAYCHEX <hr/> Mailing Address 1551 S. Washington Ave., P.O. Box 1180 <hr/> City Piscataway State NJ Zip Code 08854 <hr/> Purpose of Disbursement Payroll Taxes/Withholding Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D251947 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 3726.33

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

**13665.57**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) <b>PAYCHEX</b> <hr/> Mailing Address 1551 S. Washington Ave., P.O. Box 1180 <hr/> City Piscataway State NJ Zip Code 08854 <hr/> Purpose of Disbursement Payroll Taxes/Withholdings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D251949 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 1214.38
B.	Full Name (Last, First, Middle Initial) <b>Jane Pearson</b> <hr/> Mailing Address 58 Spring Street <hr/> City Albany State NY Zip Code 12210 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247514 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 433.87
C.	Full Name (Last, First, Middle Initial) <b>Rosalinda Perez</b> <hr/> Mailing Address 4-B Rhobella Drive <hr/> City Poughkeepsie State NY Zip Code 12603 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247515 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 115.73

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

1763.98

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Xavier Perez</p> <p>Mailing Address 4-B Rhobella Drive</p> <p>City Poughkeepsie State NY Zip Code 12603</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247516</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="115.73"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kristina Persaud</p> <p>Mailing Address 30 Valleywood Drive</p> <p>City Niskayuna State NY Zip Code 12309</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247517</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="55.11"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brian Petrucci</p> <p>Mailing Address 294 Quail Street</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247518</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.08"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="214.92"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian Petrucci <hr/> Mailing Address 294 Quail Street <hr/> City Albany State NY Zip Code 12208 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247764 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 33.71
<b>B.</b>	Full Name (Last, First, Middle Initial) Maurice B. Pitcher <hr/> Mailing Address 123 N. Hamilton Street <hr/> City Poughkeepsie State NY Zip Code 12601 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247519 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 422.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Poluzone <hr/> Mailing Address 6Chimney Ridge Road <hr/> City Nanuet State NY Zip Code 10954 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247141 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 110.22

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

566.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) George Poor	Transaction ID: D247590 Date of Disbursement 11 / 09 / 2010
	Mailing Address 96 East Street	Amount of Each Disbursement this Period 433.87
	City Honeoye Falls State NY Zip Code 14472	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Precision Strategies, LLC	Transaction ID: D250520 Date of Disbursement 10 / 28 / 2010
	Mailing Address 1015 Queen Street	Amount of Each Disbursement this Period 7260.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Slate Palm Card-Arcuri	Category/ Type
	Candidate Name Michael A. Arcuri	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sean Price	Transaction ID: D252534 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1505 Whitesboro Street	Amount of Each Disbursement this Period 73.48
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7767.35</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Shana Pughe</p> <p>Mailing Address 7350 Sally Road</p> <p>City Waterville State NY Zip Code 13480</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247591</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 181.86</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Chris Putnam</p> <p>Mailing Address 162 Proctor Blvd.</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247189</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 360.92</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Chris Putnam</p> <p>Mailing Address 162 Proctor Blvd.</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247709</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 73.48</p>

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

**616.26**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Timothy Putnam	Transaction ID: D247190 Date of Disbursement 11 / 09 / 2010
	Mailing Address 162 Proctor Blvd.	Amount of Each Disbursement this Period 73.48
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jonathan Rabunski	Transaction ID: D250165 Date of Disbursement 10 / 27 / 2010
	Mailing Address 72 Pine Brook Drive	Amount of Each Disbursement this Period 827.06
	City Larchmont State NY Zip Code 10538	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jonathan Rabunski	Transaction ID: D250435 Date of Disbursement 11 / 10 / 2010
	Mailing Address 72 Pine Brook Drive	Amount of Each Disbursement this Period 827.06
	City Larchmont State NY Zip Code 10538	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1727.60
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Jovia A. Radix

Mailing Address 4901 Avenue K

City State Zip Code  
Brooklyn NY 11234

Purpose of Disbursement  
Wages

Candidate Name  
Michael McMahon

Office Sought:  House  
 Senate  
 President

State: NY District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D250220

Date of Disbursement

11 / 10 / 2010

Amount of Each Disbursement this Period

423.85

B.

Full Name (Last, First, Middle Initial)

Jovia A. Radix

Mailing Address 4901 Avenue K

City State Zip Code  
Brooklyn NY 11234

Purpose of Disbursement  
Wages

Candidate Name  
Michael McMahon

Office Sought:  House  
 Senate  
 President

State: NY District: 13

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D250135

Date of Disbursement

10 / 27 / 2010

Amount of Each Disbursement this Period

891.66

C.

Full Name (Last, First, Middle Initial)

Anthony Ragano

Mailing Address 455 Vassar Road

City State Zip Code  
Poughkeepsie NY 12601

Purpose of Disbursement  
GOTV Canvassing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: D247767

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

142.36

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

1457.87

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anthony Ragano</p> <p>Mailing Address 455 Vassar Road</p> <p>City Poughkeepsie State NY Zip Code 12601</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246910</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88.18"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Red Horse Strategies, LLC</p> <p>Mailing Address 55 Washington Street, Suite 624</p> <p>City Brooklyn State NY Zip Code 11201</p> <p>Purpose of Disbursement Field and Canvass Campaign Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250609</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22500.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Red Horse Strategies, LLC</p> <p>Mailing Address 55 Washington Street, Suite 624</p> <p>City Brooklyn State NY Zip Code 11201</p> <p>Purpose of Disbursement Election Day Robo Calls-Generic</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251003</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12000.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="34588.18"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Ricciardi <hr/> Mailing Address 43 Pulham Road <hr/> City Cortlandt Manor State NY Zip Code 10567 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247770 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 116.37
<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Ricciardi <hr/> Mailing Address 43 Pulham Road <hr/> City Cortlandt Manor State NY Zip Code 10567 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247592 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 275.85
<b>C.</b>	Full Name (Last, First, Middle Initial) Xavier Richards <hr/> Mailing Address 5 Kingsboro Avenue <hr/> City Gloversville State NY Zip Code 12078 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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:	Transaction ID: D247593 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 433.87

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>826.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Joseph R. Ritchie</p> <p>Mailing Address 3 Vodrazka Lane</p> <p>City Hopewell Junction State NY Zip Code 12533</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247142</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="202.07"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sara Ritz</p> <p>Mailing Address 47 Manning Road</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247594</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="123.99"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sara Ritz</p> <p>Mailing Address 47 Manning Road</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247772</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="34.44"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="360.50"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Sara Ritz	Transaction ID: D246911 Date of Disbursement 10 / 29 / 2010
	Mailing Address 47 Manning Road	Amount of Each Disbursement this Period 88.18
	City Albany State NY Zip Code 12206	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Deanna Robertson	Transaction ID: D250461 Date of Disbursement 11 / 10 / 2010
	Mailing Address 7 Amato Drive	Amount of Each Disbursement this Period 803.73
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Deanna Robertson	Transaction ID: D250203 Date of Disbursement 10 / 27 / 2010
	Mailing Address 7 Amato Drive	Amount of Each Disbursement this Period 803.73
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1695.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Frieda Rodgers</p> <p>Mailing Address 1513 West Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247191</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="267.85"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Frieda Rodgers</p> <p>Mailing Address 1513 West Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246845</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="146.96"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Terence J. Rogers</p> <p>Mailing Address 140 Schrade Rd</p> <p>City Briarcliff Manor State NY Zip Code 10510</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250150</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1355.96"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.

Full Name (Last, First, Middle Initial)  
Terence J. Rogers

Transaction ID: D250229  
Date of Disbursement

Mailing Address 140 Schrade Rd

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

City Briarcliff Manor State NY Zip Code 10510

Amount of Each Disbursement this Period

Purpose of Disbursement  
Wages

1355.96
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Joe Rosati

Transaction ID: D247595  
Date of Disbursement

Mailing Address 220 Inwood Terrace

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

City Roswell State GA Zip Code 30075

Amount of Each Disbursement this Period

Purpose of Disbursement  
GOTV Canvassing

132.26
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Eric Ross

Transaction ID: D246912  
Date of Disbursement

Mailing Address 461 State Street

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

City Albany State NY Zip Code 12203

Amount of Each Disbursement this Period

Purpose of Disbursement  
GOTV Canvassing

49.60
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1537.82
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Rar Rostislav Mailing Address 2234 Rosendale Road City Niskayuna State NY Zip Code 12309 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247596 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 132.26
B.	Full Name (Last, First, Middle Initial) Eric Rotondi Mailing Address 19 Timbercrest Lane City South Setauket State NY Zip Code 11720 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250213 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 1256.19
C.	Full Name (Last, First, Middle Initial) Eric Rotondi Mailing Address 19 Timbercrest Lane City South Setauket State NY Zip Code 11720 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250130 Date of Disbursement 10 / 27 / 2010	Amount of Each Disbursement this Period 1802.37

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

3190.82

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Elliot Sabitov</p> <p>Mailing Address 880 South Route 9W</p> <p>City Congers State NY Zip Code 10920</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246797</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="183.70"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elliot Sabitov</p> <p>Mailing Address 880 South Route 9W</p> <p>City Congers State NY Zip Code 10920</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247143</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="110.22"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rocco Sainato</p> <p>Mailing Address 109 Tallmardge Place</p> <p>City Albany State NY Zip Code 12208</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247597</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.60"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="536.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Rocco Sainato <hr/> Mailing Address 109 Tallmardge Place <hr/> City Albany State NY Zip Code 12208 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246913 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 93.57
<b>B.</b>	Full Name (Last, First, Middle Initial) Sarah Sanborn <hr/> Mailing Address 44 Park Avenue <hr/> City Albany State NY Zip Code 12202 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247600 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 419.76
<b>C.</b>	Full Name (Last, First, Middle Initial) Joshua Sanders <hr/> Mailing Address 90 Ridge Road <hr/> City Rensselaer State NY Zip Code 12144 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247602 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 433.87

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	947.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Edgar R. Santana</p> <p>Mailing Address 1438 Glover Street</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251594 <b>Date of Disbursement</b> 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2678.81</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Edgar R. Santana</p> <p>Mailing Address 1438 Glover Street</p> <p>City Bronx State NY Zip Code 10462</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D251804 <b>Date of Disbursement</b> 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 2775.40</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) John Santiago</p> <p>Mailing Address 1523 High Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247194 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 165.33</p>

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

5619.54

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Stephanie Scerbo  Mailing Address 80 Route 423  City Mechanicville State NY Zip Code 12118  Purpose of Disbursement GOTV Canvassing  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247606 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 297.32
B.	Full Name (Last, First, Middle Initial) Michael Schubert  Mailing Address 716 Timber Branch Drive  City Alexandria State VA Zip Code 22302  Purpose of Disbursement Wages  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250131 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 827.06
C.	Full Name (Last, First, Middle Initial) Michael Schubert  Mailing Address 716 Timber Branch Drive  City Alexandria State VA Zip Code 22302  Purpose of Disbursement Wages  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250217 Date of Disbursement 11 / 10 / 2010  Amount of Each Disbursement this Period 567.63

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1692.01
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jung-Hee Schwartz</p> <p>Mailing Address 815 North Broadway</p> <p>City Saratoga Springs State NY Zip Code 12866</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247610</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="410.36"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matthew Scotellaro</p> <p>Mailing Address 818 Vanburen Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247195</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="283.52"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Matthew Scotellaro</p> <p>Mailing Address 818 Vanburen Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246846</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="146.96"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Aoife Semar</p> <p>Mailing Address 85 Woodland Road</p> <p>City Montvale State NJ Zip Code 07645</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247612 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 410.36</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aja Shasanmi</p> <p>Mailing Address 88 Edgecombe Ave., #3</p> <p>City New York State NY Zip Code 10030</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250218 <b>Date of Disbursement</b> 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 537.86</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Aja Shasanmi</p> <p>Mailing Address 88 Edgecombe Ave., #3</p> <p>City New York State NY Zip Code 10030</p> <p>Purpose of Disbursement Wages</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D250132 <b>Date of Disbursement</b> 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 782.54</p>

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

1730.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Josephine A. Shister	Transaction ID: D250151 Date of Disbursement 10 / 27 / 2010
	Mailing Address 711 Forest Avenue	Amount of Each Disbursement this Period 1505.36
	City Mamaroneck State NY Zip Code 10543	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Josephine A. Shister	Transaction ID: D250230 Date of Disbursement 11 / 10 / 2010
	Mailing Address 711 Forest Avenue	Amount of Each Disbursement this Period 803.73
	City Mamaroneck State NY Zip Code 10543	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Stefan Short	Transaction ID: D247613 Date of Disbursement 11 / 09 / 2010
	Mailing Address 450 New Scotland Avenue Floor 1	Amount of Each Disbursement this Period 55.11
	City Albany State NY Zip Code 12208	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2364.20
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Matthew Signorile <hr/> Mailing Address 977 Armstrong Avenue <hr/> City Staten Island State NY Zip Code 10308 <hr/> Purpose of Disbursement Wages Candidate Name Michael McMahon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250221 Date of Disbursement 11 / 10 / 2010 <hr/> Amount of Each Disbursement this Period 384.17
B.	Full Name (Last, First, Middle Initial) Matthew Signorile <hr/> Mailing Address 977 Armstrong Avenue <hr/> City Staten Island State NY Zip Code 10308 <hr/> Purpose of Disbursement Wages Candidate Name Michael McMahon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250138 Date of Disbursement 10 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 803.73
C.	Full Name (Last, First, Middle Initial) Al Simpson <hr/> Mailing Address 160 Clinton Street <hr/> City Montgomery State NY Zip Code 12549 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250926 Date of Disbursement 11 / 09 / 2010 <hr/> Amount of Each Disbursement this Period 173.59

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

1361.49

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Al Simpson	Transaction ID: D246914 Date of Disbursement 10 / 29 / 2010
	Mailing Address 160 Clinton Street	Amount of Each Disbursement this Period 152.43
	City Montgomery State NY Zip Code 12549	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Al Simpson	Transaction ID: D247775 Date of Disbursement 10 / 15 / 2010
	Mailing Address 160 Clinton Street	Amount of Each Disbursement this Period 41.33
	City Montgomery State NY Zip Code 12549	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SKDKnickerbocker LLC	Transaction ID: D250505 Date of Disbursement 10 / 25 / 2010
	Mailing Address 1818 N. Street, NW Suite 450	Amount of Each Disbursement this Period 76847.13
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Exempt Mail-McMahon	Category/ Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>77040.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) SKDKnickerbocker LLC  Mailing Address 1818 N. Street, NW Suite 450  City Washington State DC Zip Code 20036  Purpose of Disbursement Exempt Mail-McMahon  Candidate Name Michael McMahon  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250507 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	Amount of Each Disbursement this Period  91409.43
<b>B.</b>	Full Name (Last, First, Middle Initial) SKDKnickerbocker LLC  Mailing Address 1818 N. Street, NW Suite 450  City Washington State DC Zip Code 20036  Purpose of Disbursement Exempt Mail-McMahon  Candidate Name Michael McMahon  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250508 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period  50000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) SKDKnickerbocker LLC  Mailing Address 1818 N. Street, NW Suite 450  City Washington State DC Zip Code 20036  Purpose of Disbursement Exempt Mail-McMahon  Candidate Name Michael McMahon  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D250509 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period  10625.87

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>152035.30</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Denicqua Smith Mailing Address 1513 West Street City Utica State NY Zip Code 13501 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246847 Date of Disbursement 10 / 29 / 2010 Amount of Each Disbursement this Period 283.52 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Denicqua Smith Mailing Address 1513 West Street City Utica State NY Zip Code 13501 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247196 Date of Disbursement 11 / 09 / 2010 Amount of Each Disbursement this Period 404.93 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Emma Smith Mailing Address 23 Heathers Drive City Wappingers Falls State NY Zip Code 12590 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247144 Date of Disbursement 11 / 09 / 2010 Amount of Each Disbursement this Period 283.52 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	971.97
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Emma Smith	Transaction ID: D246798 Date of Disbursement 10 / 29 / 2010
	Mailing Address 23 Heathers Drive	Amount of Each Disbursement this Period 314.86
	City Wappingers Falls State NY Zip Code 12590	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Eric Smith	Transaction ID: D250140 Date of Disbursement 10 / 27 / 2010
	Mailing Address 105 Sally Road	Amount of Each Disbursement this Period 1484.92
	City Zanesville State OH Zip Code 43701	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Eric Smith	Transaction ID: D250222 Date of Disbursement 11 / 10 / 2010
	Mailing Address 105 Sally Road	Amount of Each Disbursement this Period 708.96
	City Zanesville State OH Zip Code 43701	
	Purpose of Disbursement Wages	Category/ Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2508.74
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Spencer Spells	Transaction ID: D247711 Date of Disbursement
	Mailing Address 147 Oxford Road	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City New Hartford State NY Zip Code 13413	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Canvassing	<input type="text" value="73.48"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Spencer Spells	Transaction ID: D247197 Date of Disbursement
	Mailing Address 147 Oxford Road	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City New Hartford State NY Zip Code 13413	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Canvassing	<input type="text" value="219.71"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Winding Creek Group, Inc.	Transaction ID: D250936 Date of Disbursement
	Mailing Address 2852 Connecticut Ave., NW	<input type="text" value="11"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Live Calls-Generic	<input type="text" value="7500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="7793.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Madeleine Tierney	Transaction ID: D246799 Date of Disbursement
	Mailing Address 31 Relyee Terrace	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wappingers Falls State NY Zip Code 12590	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Canvassing	<input type="text" value="128.59"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Madeleine Tierney	Transaction ID: D247145 Date of Disbursement
	Mailing Address 31 Relyee Terrace	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Wappingers Falls State NY Zip Code 12590	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Canvassing	<input type="text" value="202.07"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Matthew Timmeny	Transaction ID: D250471 Date of Disbursement
	Mailing Address 312 4th Street SE	<input type="text" value="11"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Wages	<input type="text" value="780.41"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1111.07"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Matthew Timmeny	Transaction ID: D250204 Date of Disbursement 10 / 27 / 2010
	Mailing Address 312 4th Street SE	Amount of Each Disbursement this Period 780.41
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Bryan Totten	Transaction ID: D247615 Date of Disbursement 11 / 09 / 2010
	Mailing Address 47 Mc Gregor LN	Amount of Each Disbursement this Period 135.02
	City Crompond State NY Zip Code 10517	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Bryan Totten	Transaction ID: D247777 Date of Disbursement 10 / 15 / 2010
	Mailing Address 47 Mc Gregor LN	Amount of Each Disbursement this Period 113.25
	City Crompond State NY Zip Code 10517	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1028.68

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bryan Totten <hr/> Mailing Address 47 Mc Gregor LN <hr/> City Crompond State NY Zip Code 10517 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246915 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 82.66
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Anderson Tuggle <hr/> Mailing Address 27 Sharron Court <hr/> City Hinsdale State IL Zip Code 60521 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247200 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 73.48
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Turner <hr/> Mailing Address 19 Lafko Drive <hr/> City Poughkeepsie State NY Zip Code 12603 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246916 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 88.18
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	244.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Turner  Mailing Address 19 Lafko Drive  City Poughkeepsie State NY Zip Code 12603  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247616 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period  88.18
<b>B.</b>	Full Name (Last, First, Middle Initial) Sean A Twohig  Mailing Address 14 Roundtree Court  City Beacon State NY Zip Code 12508  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247146 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period  346.11
<b>C.</b>	Full Name (Last, First, Middle Initial) Sean A Twohig  Mailing Address 14 Roundtree Court  City Beacon State NY Zip Code 12508  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246800 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period  110.22

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	544.51
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Joel Tyner Mailing Address 324 Browns Pond Road City Staatsburg State NY Zip Code 12580 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247147 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 36.74
<b>B.</b>	Full Name (Last, First, Middle Initial) Chris Ure Mailing Address 9 Buena Vista Avenue City Wallkill State NY Zip Code 12589 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247148 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 183.70
<b>C.</b>	Full Name (Last, First, Middle Initial) Chris Ure Mailing Address 9 Buena Vista Avenue City Wallkill State NY Zip Code 12589 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246801 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 220.44

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>440.88</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Peter Urmston Mailing Address 25 Pine Hill Road City Annandale State NJ Zip Code 08801 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250157 Date of Disbursement 10 / 27 / 2010	Amount of Each Disbursement this Period 803.73
B.	Full Name (Last, First, Middle Initial) Peter Urmston Mailing Address 25 Pine Hill Road City Annandale State NJ Zip Code 08801 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D250941 Date of Disbursement 11 / 10 / 2010	Amount of Each Disbursement this Period 803.73
C.	Full Name (Last, First, Middle Initial) Alexandra Vadala Mailing Address 291 West 10th Street City Deer Park State NY Zip Code 11729 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247149 Date of Disbursement 11 / 09 / 2010	Amount of Each Disbursement this Period 36.74

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1644.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Andrew Valitutto	Transaction ID: D247150 Date of Disbursement 11 / 09 / 2010
	Mailing Address 9 Russ Place	Amount of Each Disbursement this Period 146.96
	City Wappingers Falls State NY Zip Code 12590	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D251707 Date of Disbursement 11 / 04 / 2010
	Mailing Address P.O. Box 15124	Amount of Each Disbursement this Period 1092.39
	City Albany State NY Zip Code 12212-5124	
	Purpose of Disbursement Telephone	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D251652 Date of Disbursement 11 / 22 / 2010
	Mailing Address P.O. Box 15124	Amount of Each Disbursement this Period 543.03
	City Albany State NY Zip Code 12212-5124	
	Purpose of Disbursement Telephone	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1782.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D251670 Date of Disbursement 11 / 04 / 2010
	Mailing Address P.O. Box 15124	Amount of Each Disbursement this Period 1286.61
	City Albany State NY Zip Code 12212-5124	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D251689 Date of Disbursement 11 / 04 / 2010
	Mailing Address P.O. Box 15124	Amount of Each Disbursement this Period 236.11
	City Albany State NY Zip Code 12212-5124	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D251690 Date of Disbursement 11 / 04 / 2010
	Mailing Address P.O. Box 15124	Amount of Each Disbursement this Period 126.15
	City Albany State NY Zip Code 12212-5124	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1648.87

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Barbara Vinas	Transaction ID: D247617 Date of Disbursement 11 / 09 / 2010
	Mailing Address 81 Washington Street, Apt. 2	Amount of Each Disbursement this Period 368.04
	City Poughkeepsie State NY Zip Code 12601	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donald L. Vincent	Transaction ID: D250158 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11759 S. 85th Avenue	Amount of Each Disbursement this Period 780.41
	City Palos Park State IL Zip Code 60464	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Donald L. Vincent	Transaction ID: D250428 Date of Disbursement 11 / 10 / 2010
	Mailing Address 11759 S. 85th Avenue	Amount of Each Disbursement this Period 780.41
	City Palos Park State IL Zip Code 60464	
	Purpose of Disbursement Wages	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1928.86
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Dan Vollweiler	Transaction ID: D246917 Date of Disbursement 10 / 29 / 2010
	Mailing Address 656 Saratoga Road Apt. A	Amount of Each Disbursement this Period 180.97
	City Gansevoort State NY Zip Code 12831	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dan Vollweiler	Transaction ID: D247779 Date of Disbursement 10 / 15 / 2010
	Mailing Address 656 Saratoga Road Apt. A	Amount of Each Disbursement this Period 280.47
	City Gansevoort State NY Zip Code 12831	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kevin Wadzuk	Transaction ID: D247151 Date of Disbursement 11 / 09 / 2010
	Mailing Address 4 Crestwood Blvd	Amount of Each Disbursement this Period 91.85
	City Poughkeepsie State NY Zip Code 12603	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	553.29
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kevin Wadzuk</p> <p>Mailing Address 4 Crestwood Blvd</p> <p>City Poughkeepsie State NY Zip Code 12603</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D246802</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="73.48"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Darwin Warmack</p> <p>Mailing Address 1233 Stueben Street #1</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D246849</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="283.52"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Darwin Warmack</p> <p>Mailing Address 1233 Stueben Street #1</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D247201</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="219.71"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="576.71"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Harrison Watkins  Mailing Address 360 Madison Ave  City Albany State NY Zip Code 12210-1762  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246918 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 194.65
<b>B.</b>	Full Name (Last, First, Middle Initial) Harrison Watkins  Mailing Address 360 Madison Ave  City Albany State NY Zip Code 12210-1762  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247618 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 353.94
<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Watkins  Mailing Address 399 State Street # 104  City Albany State NY Zip Code 12210  Purpose of Disbursement GOTV Canvassing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247619 Date of Disbursement 11 / 09 / 2010  Amount of Each Disbursement this Period 433.87

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	982.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Yayi Wei Mailing Address 1174 Meadowdale Road City Altamont State NY Zip Code 12009 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247620 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 46.84
<b>B.</b>	Full Name (Last, First, Middle Initial) Yayi Wei Mailing Address 1174 Meadowdale Road City Altamont State NY Zip Code 12009 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247780 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 187.18
<b>C.</b>	Full Name (Last, First, Middle Initial) John Wesby Mailing Address 1105 Warren Street City Utica State NY Zip Code 13501 Purpose of Disbursement GOTV Canvassing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247203 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0	Amount of Each Disbursement this Period 36.74

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	270.76
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) John Wesby	Transaction ID: D246850 Date of Disbursement 10 / 29 / 2010
	Mailing Address 1105 Warren Street	Amount of Each Disbursement this Period 219.71
	City Utica State NY Zip Code 13501	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) James R. Wheeler	Transaction ID: D247781 Date of Disbursement 10 / 15 / 2010
	Mailing Address 239 Rt. 17K	Amount of Each Disbursement this Period 188.29
	City Newburgh State NY Zip Code 12550	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) James R. Wheeler	Transaction ID: D246919 Date of Disbursement 10 / 29 / 2010
	Mailing Address 239 Rt. 17K	Amount of Each Disbursement this Period 353.42
	City Newburgh State NY Zip Code 12550	
	Purpose of Disbursement GOTV Canvassing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>761.42</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) James R. Wheeler</p> <p>Mailing Address 239 Rt. 17K</p> <p>City Newburgh State NY Zip Code 12550</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247621</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="375.58"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mike Williams</p> <p>Mailing Address 11 South Lake Avenue</p> <p>City Albany State NY Zip Code 12203</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247622</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="45.96"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mike Williams</p> <p>Mailing Address 15 Summit Avenue</p> <p>City Albany State NY Zip Code 12209</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247623</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="149.69"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Mike Williams	Transaction ID: D246920 Date of Disbursement 10 / 29 / 2010
	Mailing Address 15 Summit Avenue	Amount of Each Disbursement this Period 49.60
	City Albany State NY Zip Code 12209	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mike Williams	Transaction ID: D247782 Date of Disbursement 10 / 15 / 2010
	Mailing Address 11 South Lake Avenue	Amount of Each Disbursement this Period 264.30
	City Albany State NY Zip Code 12203	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Matt Wing	Transaction ID: D246921 Date of Disbursement 10 / 29 / 2010
	Mailing Address 2 Bliss Schoolhouse Road	Amount of Each Disbursement this Period 126.75
	City Nassau State NY Zip Code 12123	
	Purpose of Disbursement GOTV Canvassing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

440.65

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Matt Wing</p> <p>Mailing Address 2 Bliss Schoolhouse Road</p> <p>City Nassau State NY Zip Code 12123</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247496</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="220.44"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lewis Wright</p> <p>Mailing Address 1505 Whitesboro Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D246852</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="283.52"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lewis Wright</p> <p>Mailing Address 1505 Whitesboro Street</p> <p>City Utica State NY Zip Code 13501</p> <p>Purpose of Disbursement GOTV Canvassing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D247204</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="448.94"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="952.90"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
New York State Democratic Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Christine Young <hr/> Mailing Address 33 Emerson Avenue <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247205 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 448.94
<b>B.</b>	Full Name (Last, First, Middle Initial) Christine Young <hr/> Mailing Address 33 Emerson Avenue <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D246854 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 346.20
<b>C.</b>	Full Name (Last, First, Middle Initial) Keith Young <hr/> Mailing Address 33 Emerson Avenue <hr/> City Utica State NY Zip Code 13501 <hr/> Purpose of Disbursement GOTV Canvassing <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D247206 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 91.85

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

**886.99**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 238 / 284

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

A.	Full Name (Last, First, Middle Initial) Jeff Yurcan	Transaction ID: D250223 Date of Disbursement 11 / 10 / 2010
	Mailing Address 315 East 95th Street, Apt. 5A	Amount of Each Disbursement this Period 454.01
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeff Yurcan	Transaction ID: D250143 Date of Disbursement 10 / 27 / 2010
	Mailing Address 315 East 95th Street, Apt. 5A	Amount of Each Disbursement this Period 958.26
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Wages	Category/Type
	Candidate Name Michael McMahon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Anthony Zeno	Transaction ID: D247497 Date of Disbursement 11 / 09 / 2010
	Mailing Address 41 Hoffman Road	Amount of Each Disbursement this Period 391.55
	City Pine Plains State NY Zip Code 12567	
	Purpose of Disbursement GOTV Canvassing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1803.82</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Breven Zimmerman <hr/> Mailing Address 17 Ridge Road <hr/> City Salt Point State NY Zip Code 12578 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D246922 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 73.48
<b>B.</b> Full Name (Last, First, Middle Initial) Breven Zimmerman <hr/> Mailing Address 17 Ridge Road <hr/> City Salt Point State NY Zip Code 12578 <hr/> Purpose of Disbursement GOTV Canvassing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D247783 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 142.36

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

215.84

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

1584161.39

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 240 / 284
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): Research Subscriptions
Mailing Address P.O. Box 7247-7090	
City Philadelphia State PA ZIP Code 19170-7090	

Outstanding Balance Beginning This Period 574.86	<b>Transaction ID: D228665</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 574.86

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Zale Koff Graphics, Inc.	Nature of Debt (Purpose): Printing
Mailing Address 225 Varick Street, 4th Floor	
City New York State NY ZIP Code 10014	

Outstanding Balance Beginning This Period 24613.55	<b>Transaction ID: D1365</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24613.55

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>25188.41</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	<b>25188.41</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>25188.41</b>

## SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER <b>Fundraising Consulting July 10</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">21.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">79.00</div> %  <b>Transaction ID:</b> R162
ACTIVITY OR EVENT IDENTIFIER <b>Fundraising Consulting June 10</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">21.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">79.00</div> %  <b>Transaction ID:</b> R161
ACTIVITY OR EVENT IDENTIFIER <b>Fundraising Consulting May 10</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">21.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">79.00</div> %  <b>Transaction ID:</b> R160

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 40718.05
---------------------------------------	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

<b>i) Total Administrative</b> .....	40718.05	Transaction ID: T1198
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	65000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	65000.00	Transaction ID: T1199
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYS Campaign	M M / D D / Y Y Y Y 11 / 08 / 2010	28500.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	28500.00	Transaction ID: T1200
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT NYSDC Housekeeping	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 25000.00
---------------------------------------	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	25000.00	Transaction ID: T1201
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0	30000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	Transaction ID: T1202	30000.00
<b>ii) Generic Voter Drive</b> .....	Transaction ID:	
<b>iii) Exempt Activities</b> .....	Transaction ID:	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)	Transaction ID:	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NYSDC Housekeeping	M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0	8000.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	8000.00	Transaction ID: T1203
<b>ii) Generic Voter Drive</b> .....		Transaction ID:
<b>iii) Exempt Activities</b> .....		Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)		
		Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	197218.05
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	197218.05

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Aetna			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 7247-0233			Allocated Activity or Event Year-To-Date 1182612.44		
City Philadelphia	State PA	Zip Code 19170-0233	Date <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Health Insurance			Transaction ID: D252092		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.44		325.16		411.60

<b>B. Full Name (Last, First, Middle Initial)</b> Alex Voetsch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 315 West 54th Street, Apt. 8			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10019	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D252532		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.25		956.47		1210.72

<b>C. Full Name (Last, First, Middle Initial)</b> Alex Voetsch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 315 West 54th Street, Apt. 8			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10019	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D252533		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.25		956.47		1210.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
594.94		2238.10		2833.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 1182612.44	
City	State	Zip Code	Category/ Type	
New York	NY	10029		
Purpose of Disbursement: Wages			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 2 7 / 2 0 1 0 <b>Transaction ID:</b> D251771	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

<b>B. Full Name (Last, First, Middle Initial)</b> Alison Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Lexington Avenue, Apt. 4J			Allocated Activity or Event Year-To-Date 1182612.44	
City	State	Zip Code	Category/ Type	
New York	NY	10029		
Purpose of Disbursement: Wages			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 1 / 1 0 / 2 0 1 0 <b>Transaction ID:</b> D251821	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.65		920.35		1165.00

<b>C. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 1182612.44	
City	State	Zip Code	Category/ Type	
Phoenix	AZ	85072-3852		
Purpose of Disbursement: Credit Card Fee			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 1 8 / 2 0 1 0 <b>Transaction ID:</b> D251501	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.13		128.37		162.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
523.43		1969.07		2492.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 1182612.44		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D251503		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.65		51.35		65.00

<b>B. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 1182612.44		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D251508		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.13		128.37		162.50

<b>C. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 1182612.44		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D251512		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.04		3.91		4.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.82		183.63		232.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> American Express Establishment Services			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 53852			Allocated Activity or Event Year-To-Date 1182612.44		
City Phoenix	State AZ	Zip Code 85072-3852	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: D251513		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.27"/>		<input type="text" value="16.04"/>		<input type="text" value="20.31"/>

<b>B. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 1182612.44		
City White Plains	State NY	Zip Code 10603	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251497		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="220.19"/>		<input type="text" value="828.31"/>		<input type="text" value="1048.50"/>

<b>C. Full Name (Last, First, Middle Initial)</b> Bartholomew J. Caro			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 30 Hartford Lane			Allocated Activity or Event Year-To-Date 1182612.44		
City White Plains	State NY	Zip Code 10603	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251705		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="220.19"/>		<input type="text" value="828.31"/>		<input type="text" value="1048.50"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="444.65"/>		<input type="text" value="1672.66"/>		<input type="text" value="2117.31"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Bedford Grove LLC			<b>Type of Allocated Activity:</b> <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 461 Park Avenue South, 10th Floor			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">9000.00</div>	
City	State	Zip Code	Category/ Type	
New York	NY	10016-6822		
Purpose of Disbursement: Fundraising Consulting			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 2 6 / 2 0 1 0 <b>Transaction ID:</b> D252385	
Activity or Event Identifier: Fundraising Consulting June 10				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1890.00		7110.00		9000.00

<b>B. Full Name (Last, First, Middle Initial)</b> Bedford Grove LLC			<b>Type of Allocated Activity:</b> <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 461 Park Avenue South, 10th Floor			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">2000.00</div>	
City	State	Zip Code	Category/ Type	
New York	NY	10016-6822		
Purpose of Disbursement: Fundraising Consulting			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 2 6 / 2 0 1 0 <b>Transaction ID:</b> D250622	
Activity or Event Identifier: Fundraising Consulting May 10				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
420.00		1580.00		2000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Bedford Grove LLC			<b>Type of Allocated Activity:</b> <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 461 Park Avenue South, 10th Floor			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%;">4000.00</div>	
City	State	Zip Code	Category/ Type	
New York	NY	10016-6822		
Purpose of Disbursement: Fundraising Consulting			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 1 0 / 2 6 / 2 0 1 0 <b>Transaction ID:</b> D252387	
Activity or Event Identifier: Fundraising Consulting July 10				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		3160.00		4000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3150.00		11850.00		15000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Bill Lynch Associates, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 308 Lenox Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10027	Date MM / DD / YYYY 11 / 02 / 2010		
Purpose of Disbursement: Media Consulting			Transaction ID: D251004		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2100.00		7900.00		10000.00

<b>B. Full Name (Last, First, Middle Initial)</b> Capital One Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 424 Madison Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10017	Date MM / DD / YYYY 10 / 18 / 2010		
Purpose of Disbursement: Vendor Refund-Bank Charge			Transaction ID: D251632		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-123.29		-463.80		-587.09

<b>C. Full Name (Last, First, Middle Initial)</b> Caroline Griffin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11 Harris Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City Albany	State NY	Zip Code 12208	Date MM / DD / YYYY 11 / 10 / 2010		
Purpose of Disbursement: Wages			Transaction ID: D252496		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
428.64		1612.50		2041.14

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2405.35		9048.70		11454.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Caroline Griffin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11 Harris Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City Albany	State NY	Zip Code 12208	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D250580		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
571.55		2150.10		2721.65

<b>B. Full Name (Last, First, Middle Initial)</b> Cathy Calhoun			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 176 Thornberry Lane			Allocated Activity or Event Year-To-Date 1182612.44		
City Rensselaer	State NY	Zip Code 12144	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D252493		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
593.68		2233.35		2827.03

<b>C. Full Name (Last, First, Middle Initial)</b> Cathy Calhoun			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 176 Thornberry Lane			Allocated Activity or Event Year-To-Date 1182612.44		
City Rensselaer	State NY	Zip Code 12144	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D250577		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
801.36		3014.65		3816.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1966.59		7398.10		9364.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Danielle Bennett			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 27 Van Dam Street			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Brooklyn	NY	11222	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Wages			Transaction ID: D251696		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
215.11		809.21		1024.32

<b>B. Full Name (Last, First, Middle Initial)</b> Danielle Bennett			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 27 Van Dam Street			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Brooklyn	NY	11222	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Wages			Transaction ID: D250575		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.03		1079.80		1366.83

<b>C. Full Name (Last, First, Middle Initial)</b> Darryl White			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 111 15th Street, Apt. 9			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Brooklyn	NY	11215	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Wages			Transaction ID: D251830		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
229.80		864.48		1094.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
731.94		2753.49		3485.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Darryl White  
**Mailing Address**  
111 15th Street, Apt. 9  
**City** Brooklyn **State** NY **Zip Code** 11215  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1182612.44  
**Date** 10 / 29 / 2010  
**Transaction ID:** D250606

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
302.73		1138.83		1441.56

**B. Full Name (Last, First, Middle Initial)**  
Elizabeth LaFauce  
**Mailing Address**  
55-70 61st Street  
**City** Maspeth **State** NY **Zip Code** 11378  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1182612.44  
**Date** 10 / 29 / 2010  
**Transaction ID:** D251683

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.82		853.29		1080.11

**C. Full Name (Last, First, Middle Initial)**  
Elizabeth LaFauce  
**Mailing Address**  
55-70 61st Street  
**City** Maspeth **State** NY **Zip Code** 11378  
**Purpose of Disbursement:**  
Wages  
**Activity or Event Identifier:**  
Administrative

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
1182612.44  
**Date** 11 / 10 / 2010  
**Transaction ID:** D251740

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.23		636.62		805.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
698.78		2628.74		3327.52

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Isabelle M. Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.			Allocated Activity or Event Year-To-Date 1182612.44		
City Jamaica	State NY	Zip Code 11433	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251556		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
283.91		1068.06		1351.97

<b>B. Full Name (Last, First, Middle Initial)</b> Isabelle M. Parker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.			Allocated Activity or Event Year-To-Date 1182612.44		
City Jamaica	State NY	Zip Code 11433	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251796		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.49		1107.85		1402.34

<b>C. Full Name (Last, First, Middle Initial)</b> Jared Rosen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 West 88 Street, Apt. 8			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10024	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251800		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
282.01		1060.88		1342.89

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
860.41		3236.79		4097.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
50 West 88 Street, Apt. 8

City	State	Zip Code
New York	NY	10024

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D250594

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

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

Mailing Address  
352 State Street, 5C

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D251715

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.66		491.54		622.20

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

Mailing Address  
352 State Street, 5C

City	State	Zip Code
Albany	NY	12210

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D250623

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
260.74		980.88		1241.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
766.13		2882.12		3648.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Jessie Streich-Kest			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1710 Newkirk Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City Brooklyn	State NY	Zip Code 11226	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251815		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.23		636.62		805.85

<b>B. Full Name (Last, First, Middle Initial)</b> Jessie Streich-Kest			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1710 Newkirk Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City Brooklyn	State NY	Zip Code 11226	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D250604		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.82		853.29		1080.11

<b>C. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1182612.44		
City Canton	State NY	Zip Code 13617	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251543		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
671.78		2527.17		3198.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1067.83		4017.08		5084.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> June F. O'Neill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 75 Pollock Rd.			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Canton	NY	13617			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251791		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
720.97		2712.22		3433.19

<b>B. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
East Brunswick	NJ	08816-1103			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251528		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
289.45		1088.89		1378.34

<b>C. Full Name (Last, First, Middle Initial)</b> Leslie Ng			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 14 Colburn Rd			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
East Brunswick	NJ	08816-1103			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251782		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
318.68		1198.82		1517.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1329.10		4999.93		6329.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Mallory Ward			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 353 E 83rd Street, Apt. 19G			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
New York	NY	10028			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251603		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

<b>B. Full Name (Last, First, Middle Initial)</b> Mallory Ward			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 353 E 83rd Street, Apt. 19G			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
New York	NY	10028			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251825		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
374.73		1409.70		1784.43

<b>C. Full Name (Last, First, Middle Initial)</b> Marricka Scott-McFadden			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4158 Bruner Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Bronx	NY	10466			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251809		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.16		816.93		1034.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
966.62		3636.33		4602.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Marricka Scott-McFadden			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4158 Bruner Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Bronx	NY	10466			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D250598		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.09		1080.00		1367.09

<b>B. Full Name (Last, First, Middle Initial)</b> Melody Lopez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 132 Caryl Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Yonkers	NY	10705			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251744		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.75		1082.49		1370.24

<b>C. Full Name (Last, First, Middle Initial)</b> Melody Lopez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 132 Caryl Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Yonkers	NY	10705			
Purpose of Disbursement: Wages					
Activity or Event Identifier: Administrative			Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> <b>Transaction ID:</b> D251685		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
378.50		1423.87		1802.37

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
953.34		3586.36		4539.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> NYSDC Housekeeping Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 424 Madison Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10008	Date MM / DD / YYYY 11 / 17 / 2010		
Purpose of Disbursement: Trxfr of nonfed on offset (See Sch. A)			Transaction ID: D252102		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
555.76		2090.74		2646.50

<b>B. Full Name (Last, First, Middle Initial)</b> Oxford Health Plans			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1697			Allocated Activity or Event Year-To-Date 1182612.44		
City Newark	State NJ	Zip Code 07101-1697	Date MM / DD / YYYY 11 / 05 / 2010		
Purpose of Disbursement: Health Insurance			Transaction ID: D252097		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
994.13		3739.80		4733.93

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date MM / DD / YYYY 10 / 27 / 2010		
Purpose of Disbursement: Paryroll Taxes/Withholdings			Transaction ID: D251883		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1614.41		6073.26		7687.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3164.30		11903.80		15068.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D251920		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2395.86		9012.98		11408.84

<b>B. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: D251930		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.06		22.78		28.84

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D251934		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3065.54		11532.25		14597.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5467.46		20568.01		26035.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Payroll Taxes/Withholdings			Transaction ID: D252070		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="138.00"/>		<input type="text" value="519.14"/>		<input type="text" value="657.14"/>

<b>B. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: D252071		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="26.93"/>		<input type="text" value="101.33"/>		<input type="text" value="128.26"/>

<b>C. Full Name (Last, First, Middle Initial)</b> PAYCHEX			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1551 S. Washington Ave., P.O. Box 1180			Allocated Activity or Event Year-To-Date 1182612.44		
City Piscataway	State NJ	Zip Code 08854	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>		
Purpose of Disbursement: Payroll Service			Transaction ID: D252075		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="40.23"/>		<input type="text" value="151.32"/>		<input type="text" value="191.55"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="205.16"/>		<input type="text" value="771.79"/>		<input type="text" value="976.95"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Sean Knox			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 315 N. Spaulding #8			Allocated Activity or Event Year-To-Date 1182612.44		
City Los Angeles	State CA	Zip Code 90036	Date <input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251517		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
173.68		653.38		827.06

<b>B. Full Name (Last, First, Middle Initial)</b> Sean Knox			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 315 N. Spaulding #8			Allocated Activity or Event Year-To-Date 1182612.44		
City Los Angeles	State CA	Zip Code 90036	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251737		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.16		309.09		391.25

<b>C. Full Name (Last, First, Middle Initial)</b> Sheraton Hotel and Towers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 811 Seventh Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10019	Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Election Night Expense			Transaction ID: D251000		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25515.00		95985.00		121500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25770.84		96947.47		122718.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Sheraton Hotel and Towers

Mailing Address  
811 Seventh Avenue

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
Election Night Expense

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date  /  /   
**Transaction ID:** D251005

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5985.00		22515.00		28500.00

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

Mailing Address  
192 Sackett Street, #4R

City	State	Zip Code
Brooklyn	NY	11231

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date  /  /   
**Transaction ID:** D251494

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.71		1676.74		2122.45

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

Mailing Address  
192 Sackett Street, #4R

City	State	Zip Code
Brooklyn	NY	11231

Purpose of Disbursement:  
Wages

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date  /  /   
**Transaction ID:** D251698

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
445.71		1676.74		2122.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6876.42		25868.48		32744.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Tamar Zeilberger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Wall Street			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
New York	NY	10005			
Purpose of Disbursement: Wages			Date		
Activity or Event Identifier: Administrative			M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0 <b>Transaction ID:</b> D251606		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.35		573.11		725.46

<b>B. Full Name (Last, First, Middle Initial)</b> Tamar Zeilberger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 37 Wall Street			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
New York	NY	10005			
Purpose of Disbursement: Wages			Date		
Activity or Event Identifier: Administrative			M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 1 0 <b>Transaction ID:</b> D251835		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.35		573.11		725.46

<b>C. Full Name (Last, First, Middle Initial)</b> TriSource Solutions LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5405 Utica Ridge Road, Suite 208			Allocated Activity or Event Year-To-Date 1182612.44		
City	State	Zip Code	Category/Type		
Davenport	IA	52807			
Purpose of Disbursement: Credit Card Fee			Date		
Activity or Event Identifier: Administrative			M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0 <b>Transaction ID:</b> D251514		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.89		40.96		51.85

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.59		1187.18		1502.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Tru Color Technologies			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3407 37th Avenue			Allocated Activity or Event Year-To-Date 1182612.44		
City Long Island City	State NY	Zip Code 11101	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Election Night Technical Services			Transaction ID: D250615		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1551.31		5835.86		7387.17

<b>B. Full Name (Last, First, Middle Initial)</b> UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 7247-0244			Allocated Activity or Event Year-To-Date 1182612.44		
City Philadelphia	State PA	Zip Code 19170-0001	Date <input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Shipping			Transaction ID: D252086		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.48		584.91		740.39

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 15124			Allocated Activity or Event Year-To-Date 1182612.44		
City Albany	State NY	Zip Code 12212-5124	Date <input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Telephone			Transaction ID: D252103		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.49		400.62		507.11

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1813.28		6821.39		8634.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Yorman Nunez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2707 Sedgwick Avenue, Apt. 1M			Allocated Activity or Event Year-To-Date 1182612.44		
City Bronx	State NY	Zip Code 10468	Date <input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D251788		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
185.11		696.37		881.48

<b>B. Full Name (Last, First, Middle Initial)</b> Yorman Nunez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2707 Sedgwick Avenue, Apt. 1M			Allocated Activity or Event Year-To-Date 1182612.44		
City Bronx	State NY	Zip Code 10468	Date <input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Wages			Transaction ID: D250592		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
248.31		934.11		1182.42

<b>C. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 1182612.44		
City Newark	State NJ	Zip Code 07101-1270	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Credit Card Payment-see below			Transaction ID: D252120		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2783.45		10471.09		13254.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3216.87		12101.57		15318.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
All Taxi Management Inc

Mailing Address  
4125 36th Street

City State Zip Code  
Long Island City NY 11101

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Date 10 / 28 / 2010

Transaction ID: D252125

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.23		8.37		10.60

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

Mailing Address  
60 Massachusetts Avenue North Floor West

City State Zip Code  
Washington DC 20002

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Date 10 / 28 / 2010

Transaction ID: D252133

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.82		104.68		132.50

**C. Full Name (Last, First, Middle Initial)**  
AT&T Mobility

Mailing Address  
P.O. Box 6463

City State Zip Code  
Carol Stream IL 60197-6463

Purpose of Disbursement:  
Telephone

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Date 10 / 28 / 2010

Transaction ID: D252135

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
69.97		263.21		333.18

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Black Box Network Services

Mailing Address  
21398 Network Place

City State Zip Code  
Chicago IL 60673

Purpose of Disbursement:  
Telephone Maintenance

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date   /   /

Transaction ID: D232935

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="291.52"/>		<input type="text" value="1096.65"/>		<input type="text" value="1388.17"/>

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

Mailing Address  
257 Park Avenue S

City State Zip Code  
New York NY 10010

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date   /   /

Transaction ID: D252165

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="18.27"/>		<input type="text" value="68.72"/>		<input type="text" value="86.99"/>

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

Mailing Address  
P.O. Box 9242

City State Zip Code  
Uniondale NY 11555-9242

Purpose of Disbursement:  
Telephone

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date   /   /

Transaction ID: D252168

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="48.54"/>		<input type="text" value="182.60"/>		<input type="text" value="231.14"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
C.H. Evans Brewing Co. Albany Pump Station

Mailing Address  
19 Quackenbush Square

City	State	Zip Code	Category/ Type
Albany	NY	12207	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252146

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.41		16.59		21.00

**B. Full Name (Last, First, Middle Initial)**  
Cafe Guy and Gallard

Mailing Address  
459 Park Avenue South

City	State	Zip Code	Category/ Type
New York	NY	10016	

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252162

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.28		332.10		420.38

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

Mailing Address  
Los Rosales Street San Jeronimo Grounds

City	State	Zip Code	Category/ Type
San Juan	PR	00901	

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252143

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.04		150.61		190.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
6100 S Yale Avenue

City Tulsa	State OK	Zip Code 74136-1905	Category/ Type
Purpose of Disbursement: Travel			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 

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

  
**Transaction ID:** D252134

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

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

Mailing Address  
Ten Eyck Plaza      State And Lodge Street

City Albany	State NY	Zip Code 12207	Category/ Type
Purpose of Disbursement: Travel			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 

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

  
**Transaction ID:** D252144

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.67		198.13		250.80

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

Mailing Address  
6922 Hollywood Blvd., # 800

City Los Angeles	State CA	Zip Code 90028-6154	Category/ Type
Purpose of Disbursement: Internet Access			

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 

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

  
**Transaction ID:** D252159

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.72		74.18		93.90

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Enterprise Rent-A-Car Mailing Address 6805 State Highway 56 City State Zip Code Potsdam NY 13676 Purpose of Disbursement: Travel Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1182612.44 Date MM / DD / YYYY 10 / 28 / 2010 <b>Transaction ID:</b> D252132
--	--

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.68		766.22		969.90

<b>B. Full Name (Last, First, Middle Initial)</b> Fresno's North Syracuse Mailing Address 3920 Brewerton Rd City State Zip Code Syracuse NY 13212 Purpose of Disbursement: Meetings/Meals Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1182612.44 Date MM / DD / YYYY 10 / 28 / 2010 <b>Transaction ID:</b> D252158
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.68		40.18		50.86

<b>C. Full Name (Last, First, Middle Initial)</b> GE Capital Mailing Address P.O. Box 642333 City State Zip Code Pittsburgh PA 15264-2333 Purpose of Disbursement: Equipment Lease Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 1182612.44 Date MM / DD / YYYY 10 / 28 / 2010 <b>Transaction ID:</b> D252161
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.64		246.94		312.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
3775 Main Street

City State Zip Code  
Warrensburg NY 12885

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252128

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.56		28.44		36.00

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

Mailing Address  
14455 N Hayden Rd Ste 219

City State Zip Code  
Scottsdale AZ 85260-6993

Purpose of Disbursement:  
Website

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252167

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.88		48.46		61.34

**C. Full Name (Last, First, Middle Initial)**  
Hampton Inn & Suites

Mailing Address  
220 Delaware Avenue

City State Zip Code  
Buffalo NY 14202

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252154

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
152.11		572.22		724.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
180 Breunig Rd.

City	State	Zip Code
New Windsor	NY	12553

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252150

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.55		284.19		359.74

**B. Full Name (Last, First, Middle Initial)**  
Hong Kong Noodle Inc

Mailing Address  
174 Lexington Avenue

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement:  
Meetings/Meals

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252142

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.97		82.63		104.60

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

Mailing Address  
11251 Northwest Freeway, Suite 400

City	State	Zip Code
Houston	TX	77092

Purpose of Disbursement:  
Website

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date   /   /      
**Transaction ID:** D252140

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.49		39.46		49.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
150 Mathilda Place, Suite 104

City State Zip Code  
Sunnyvale CA 94086

Purpose of Disbursement:  
Computer Server Hosting

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 10 / 28 / 2010  
Transaction ID: D252151

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.06		395.24		500.30

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

Mailing Address  
1501 E 34th Street

City State Zip Code  
Brooklyn NY 11234-2601

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 10 / 28 / 2010  
Transaction ID: D252123

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.79		6.72		8.51

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

Mailing Address  
P.O. Box 17435

City State Zip Code  
Salt Lake City UT 84117-7435

Purpose of Disbursement:  
Travel

Activity or Event Identifier:  
Administrative  
**[MEMO ITEM]**

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
1182612.44

Date 10 / 28 / 2010  
Transaction ID: D252163

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.47		283.93		359.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Laughlin's Beef & Barrel

Mailing Address  
333 Franklin Street

City State Zip Code  
Buffalo NY 14202

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252156

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.76		32.96		41.72

**B. Full Name (Last, First, Middle Initial)**  
Log Jam/Glens Falls Inc

Mailing Address  
1484 State Route 9

City State Zip Code  
Lake George NY 12845

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252145

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.14		45.69		57.83

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

Mailing Address  
5959 Las Colinas Blvd.

City State Zip Code  
Irving TX 75039-2298

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252153

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.66		36.34		46.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

### SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
13939 State Route 31

City State Zip Code  
Albion NY 14411-9303

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252157

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.40		20.31		25.71

**B.** Full Name (Last, First, Middle Initial)  
NYC Taxi & Limousine Commission

Mailing Address  
40 Rector Street

City State Zip Code  
New York NY 10006

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252126

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.52		9.48		12.00

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

Mailing Address  
37-03 21st Street

City State Zip Code  
Long Island City NY 11101

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 10 / 28 / 2010

Transaction ID: D252127

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.23		8.37		10.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

**A. Full Name (Last, First, Middle Initial)**  
Pay2Park

Mailing Address  
257 Franklin Street

City	State	Zip Code
Buffalo	NY	14202

Purpose of Disbursement:  
Travel

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D252152

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.10		7.90		10.00

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

Mailing Address  
2145 Hamilton Avenue

City	State	Zip Code
San Jose	CA	95125-5905

Purpose of Disbursement:  
Food & Beverage

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D252160

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.80		40.63		51.43

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

Mailing Address  
65 W 55th Street

City	State	Zip Code
New York	NY	10019

Purpose of Disbursement:  
Meetings/Meals

Category/  
Type

Type of Allocated Activity:

Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

[MEMO ITEM]

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: D252131

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.04		26.46		33.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Transbeam			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 20 West 36th Street, 2nd Floor			Allocated Activity or Event Year-To-Date 1182612.44		
City New York	State NY	Zip Code 10018	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Internet Access			Transaction ID: D252166		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.88		304.27		385.15

<b>B. Full Name (Last, First, Middle Initial)</b> US Airways			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4000 E Sky Harbor Blvd.			Allocated Activity or Event Year-To-Date 1182612.44		
City Phoenix	State AZ	Zip Code 85034	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Travel			Transaction ID: D252141		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.18		343.02		434.20

<b>C. Full Name (Last, First, Middle Initial)</b> Valero			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9830 Colonnade Blvd			Allocated Activity or Event Year-To-Date 1182612.44		
City San Antonio	State TX	Zip Code 78230-2202	Date <input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Travel			Transaction ID: D252155		
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		35.57		45.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New York State Democratic Committee

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

Mailing Address  
P.O. Box 408

City	State	Zip Code
Newark	NJ	07101-0408

Purpose of Disbursement:  
Blackberry/Cellphone Service

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 

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

Transaction ID: D232939

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
246.20		926.17		1172.37

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

Mailing Address  
P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement:  
Telephone

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1182612.44

Activity or Event Identifier:  
Administrative

**[MEMO ITEM]**

Date 

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

Transaction ID: D252164

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
860.83		3238.36		4099.19

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
63337.85	238270.79	301608.64

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SchedL1

NAME OF COMMITTEE (In Full) New York State Democratic Committee
NAME OF ACCOUNT Levin account

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	189.58	189.58
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	189.58	189.58
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	189.58	189.58