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

Excelsior Committee

ADDRESS (number and street)

461 Park Ave South

9th Floor

Check if different than previously reported. (ACC)

New York | NY | 10016 –

CITY | STATE | ZIPCODE

2. **FEC IDENTIFICATION NUMBER**

C00433037

3. IS THIS REPORT [X] 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)
- [X] 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)
- [ ] Mar 20 (M3)
- [ ] Apr 20 (M4)
- [ ] May 20 (M5)
- [ ] Jun 20 (M6)
- [ ] Jul 20 (M7)
- [ ] Aug 20 (M8)
- [ ] Sep 20 (M9)
- [ ] Oct 20 (M10)
- [ ] Nov 20 (M11) (Non-Election Year Only)
- [ ] Dec 20 (M12) (Non-Election Year Only)
- [ ] Jan 31 (YE)

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

- [ ] Primary (12P)
- [ ] Convention (12C)
- [ ] General (12G)
- [ ] Special (12G)
- [ ] Runoff (12R)

Election on ____ in the State of ____

(d) 30-Day **Post** -Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on ____ in the State of ____

5. Covering Period 07 01 2007 through 12 31 2007

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: Jerry Barbanel

Signature of Treasurer: Electronically Filed by Jerry Barbanel — Date 01 18 2008

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name
Excelsior Committee

Report Covering the Period: From: M M 07 D D 01 Y Y Y Y 2007 To: M M 12 D D 31 Y Y Y Y 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		0.00
(b) Cash on Hand at Begining of Reporting Period	32894.56	
(c) Total Receipts (from Line 19)	30377.10	75709.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	63271.66	75709.03
7. Total Disbursements (from Line 31)	15298.42	27735.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47973.24	47973.24
9. Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ 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

Write or Type Committee Name
Excelsior Committee

Report Covering the Period: From: M M 07 D D 01 Y Y Y Y 2007 To: M M 12 D D 31 Y Y Y Y 2007

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)	30000.00	75300.00
(ii) Unitemized	0.00	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	30000.00	75305.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	30000.00	75305.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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)	0.00	18.97
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	377.10	385.06
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	30377.10	75709.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30377.10	75709.03

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	10298.42	17435.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	10298.42	17435.79
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	5000.00	10300.00
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	0.00
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	0.00	0.00
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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15298.42	27735.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	15298.42	27735.79

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	30000.00	75305.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	75305.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10298.42	17435.79
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	18.97
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10298.42	17416.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial)
Robert Blackwell, Jr.
Mailing Address 4536 S Lake Park Ave
City: Chicago State: IL Zip Code: 60653-4510
FEC ID number of contributing federal political committee. C
Name of Employer: Killerspin
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 12 / 28 / 2007
Transaction ID: C14560801
Amount of Each Receipt this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Dennis J. Enright
Mailing Address 136 Terrace Ave
City: Jersey City State: NJ Zip Code: 07307-4149
FEC ID number of contributing federal political committee. C
Name of Employer: NW Financial Group, LLC
Occupation: Principal and Founder
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 11 / 28 / 2007
Transaction ID: C13316379
Amount of Each Receipt this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
Michael J. Falcone
Mailing Address 250 S Clinton St Ste 200
City: Syracuse State: NY Zip Code: 13202-1263
FEC ID number of contributing federal political committee. C
Name of Employer: Pioneer Companies
Occupation: Real Estate
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 11 / 13 / 2007
Transaction ID: C13264439
Amount of Each Receipt this Period: 5000.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial)
Samuel J Heyman
Mailing Address 667 Madison Ave
City: New York State: NY Zip Code: 10065-8029
FEC ID number of contributing federal political committee. C
Name of Employer: International Specialty Products
Occupation: Chairman
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 26 / 2007
Transaction ID: C12114357
Amount of Each Receipt this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Joan E. Mintz
Mailing Address 38 E 85th St
City: New York State: NY Zip Code: 10028-0969
FEC ID number of contributing federal political committee. C
Name of Employer: United Neighbors of East Midtown
Occupation: Executive Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 10 / 10 / 2007
Transaction ID: C12066432
Amount of Each Receipt this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
Roger B Tilles
Mailing Address 98 Myrtle Dr
City: Great Neck State: NY Zip Code: 11021-1825
FEC ID number of contributing federal political committee. C
Name of Employer: Board of Regents
Occupation: Member
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 12 / 12 / 2007
Transaction ID: C14545850
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) 15000.00

TOTAL This Period (last page this line number only) 30000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 18

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

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 07 / 31 / 2007
Transaction ID: C14550169
Amount of Each Receipt this Period: 32.36
*

B.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 08 / 31 / 2007
Transaction ID: C14550170
Amount of Each Receipt this Period: 101.22
*

C.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 09 / 30 / 2007
Transaction ID: C14550171
Amount of Each Receipt this Period: 84.49
*

SUBTOTAL of Receipts This Page (optional) ..... ▶ 218.07

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

Image# 28930069890

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 9 / 18

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

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 10 / 31 / 2007
Transaction ID: C14550172
Amount of Each Receipt this Period: 55.06
*

B.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 11 / 30 / 2007
Transaction ID: C14560510
Amount of Each Receipt this Period: 51.79
*

C.
Full Name (Last, First, Middle Initial)
North Fork Bank
Mailing Address 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 404.03
Date of Receipt: 12 / 31 / 2007
Transaction ID: C14560511
Amount of Each Receipt this Period: 52.18
*

SUBTOTAL of Receipts This Page (optional) ..... ▶ **159.03**

TOTAL This Period (last page this line number only) ..... ▶ **377.10**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): American Express Merchant Services
Mailing Address: PO Box 53852
City: Phoenix State: AZ Zip Code: 85072-3852
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280061
Date of Disbursement: 07 / 25 / 2007
Amount of Each Disbursement this Period: 147.50

B.
Full Name (Last, First, Middle Initial): American Express Merchant Services
Mailing Address: PO Box 53852
City: Phoenix State: AZ Zip Code: 85072-3852
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280741
Date of Disbursement: 12 / 21 / 2007
Amount of Each Disbursement this Period: 4.50

C.
Full Name (Last, First, Middle Initial): American Express Merchant Services
Mailing Address: PO Box 53852
City: Phoenix State: AZ Zip Code: 85072-3852
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280742
Date of Disbursement: 12 / 26 / 2007
Amount of Each Disbursement this Period: 147.50

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 299.50

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.

Full Name (Last, First, Middle Initial): Chase Merchant Services
Mailing Address: PO Box 6600
City: Hagerstown State: MD Zip Code: 21741-6600
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280739
Date of Disbursement: 11 / 05 / 2007
Amount of Each Disbursement this Period: 125.50

B.

Full Name (Last, First, Middle Initial): Chase Merchant Services
Mailing Address: PO Box 6600
City: Hagerstown State: MD Zip Code: 21741-6600
Purpose of Disbursement: Credut Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280740
Date of Disbursement: 11 / 05 / 2007
Amount of Each Disbursement this Period: 121.00

C.

Full Name (Last, First, Middle Initial): Chase Merchant Services
Mailing Address: PO Box 6600
City: Hagerstown State: MD Zip Code: 21741-6600
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280059
Date of Disbursement: 07 / 05 / 2007
Amount of Each Disbursement this Period: 125.50

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **372.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): Chase Merchant Services
Mailing Address: PO Box 6600
City: Hagerstown State: MD Zip Code: 21741-6600
Purpose of Disbursement: Credit Card Merchant Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280060
Date of Disbursement: 07 / 05 / 2007
Amount of Each Disbursement this Period: 121.00

B.
Full Name (Last, First, Middle Initial): Allyson Giard
Mailing Address: 55 West 95th Street Apt. 55
City: New York State: NY Zip Code: 10025
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280039
Date of Disbursement: 12 / 13 / 2007
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Allyson Giard
Mailing Address: 55 West 95th Street Apt. 55
City: New York State: NY Zip Code: 10025
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280040
Date of Disbursement: 11 / 07 / 2007
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2121.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): Allyson Giard
Mailing Address: 55 West 95th Street, Apt. 55
City: New York State: NY Zip Code: 10025
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280041
Date of Disbursement: 09 / 28 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Allyson Giard
Mailing Address: 55 West 95th Street, Apt. 55
City: New York State: NY Zip Code: 10025
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280042
Date of Disbursement: 08 / 31 / 2007
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Allyson Giard
Mailing Address: 55 West 95th Street, Apt. 55
City: New York State: NY Zip Code: 10025
Purpose of Disbursement: Salary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280043
Date of Disbursement: 08 / 01 / 2007
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): NGP Software, Inc.
Mailing Address: 1101 Vermont Ave NW, Ste 710
City: Washington State: DC Zip Code: 20005-3521
Purpose of Disbursement: Campaign Software
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280044
Date of Disbursement: 12 / 06 / 2007
Amount of Each Disbursement this Period: 300.00

B.
Full Name (Last, First, Middle Initial): NGP Software, Inc.
Mailing Address: 1101 Vermont Ave NW, Ste 710
City: Washington State: DC Zip Code: 20005-3521
Purpose of Disbursement: Campaign Software
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280045
Date of Disbursement: 10 / 04 / 2007
Amount of Each Disbursement this Period: 450.00

C.
Full Name (Last, First, Middle Initial): NGP Software, Inc.
Mailing Address: 1101 Vermont Ave NW, Ste 710
City: Washington State: DC Zip Code: 20005-3521
Purpose of Disbursement: Campaign Software
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280046
Date of Disbursement: 09 / 28 / 2007
Amount of Each Disbursement this Period: 300.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1050.00**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): NGP Software, Inc.
Mailing Address: 1101 Vermont Ave NW, Ste 710
City: Washington State: DC Zip Code: 20005-3521
Purpose of Disbursement: Campaign Software
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280047
Date of Disbursement: 08 / 01 / 2007
Amount of Each Disbursement this Period: 450.00

B.
Full Name (Last, First, Middle Initial): North Fork Bank
Mailing Address: 424 Madison Avenue, 2nd Fl.
City: New York State: NY Zip Code: 10017
Purpose of Disbursement: Bank Charge
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280057
Date of Disbursement: 07 / 31 / 2007
Amount of Each Disbursement this Period: 5.92

C.
Full Name (Last, First, Middle Initial): VShift
Mailing Address: 895 Boradway
City: New York State: NY Zip Code: 10003
Purpose of Disbursement: Website
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Transaction ID: D280052
Date of Disbursement: 11 / 15 / 2007
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1455.92**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.
Full Name (Last, First, Middle Initial): VShift
Mailing Address: 895 Boradway
City: New York State: NY Zip Code: 10003
Purpose of Disbursement: Website
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280053
Date of Disbursement: 09 / 20 / 2007
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): VShift
Mailing Address: 895 Boradway
City: New York State: NY Zip Code: 10003
Purpose of Disbursement: Website
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280054
Date of Disbursement: 07 / 20 / 2007
Amount of Each Disbursement this Period: 500.00

C.
Full Name (Last, First, Middle Initial): VShift
Mailing Address: 895 Boradway
City: New York State: NY Zip Code: 10003
Purpose of Disbursement: Website
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼
Transaction ID: D280055
Date of Disbursement: 07 / 20 / 2007
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

TOTAL This Period (last page this line number only) ..... ▶ **10298.42**

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)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.

Full Name (Last, First, Middle Initial): Arcuri for Congress
Mailing Address: PO Box 8508
City: Utica State: NY Zip Code: 13505-8508
Purpose of Disbursement: Campaign Contribution
Candidate Name: Michael Angelo Arcuri
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 24
Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D280056
Date of Disbursement: 07 / 09 / 2007
Amount of Each Disbursement this Period: 1000.00

B.

Full Name (Last, First, Middle Initial): Friends of Dan Maffei
Mailing Address: P.O. Box 74
City: Syracuse State: NY Zip Code: 13214
Purpose of Disbursement: Campaign Contribution
Candidate Name: Dan Maffei
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 25
Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D280050
Date of Disbursement: 09 / 07 / 2007
Amount of Each Disbursement this Period: 1000.00

C.

Full Name (Last, First, Middle Initial): Friends of Dan Maffei
Mailing Address: P.O. Box 74
City: Syracuse State: NY Zip Code: 13214
Purpose of Disbursement: Campaign Contribution
Candidate Name: Dan Maffei
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 25
Disbursement For: 2008 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D280048
Date of Disbursement: 11 / 28 / 2007
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Excelsior Committee

A.

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

Mailing Address PO Box 15734

City Washington State DC Zip Code 20003-0734

Purpose of Disbursement
Campaign Contribution

Category/Type: 011

Candidate Name
Kirsten E. Gillibrand

Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 20

Disbursement For: 2008
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: D280049
Date of Disbursement
MM 09 / DD 19 / YYYY 2007

Amount of Each Disbursement this Period
1000.00

B.

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

Mailing Address 60 E Market Street
Suite 244

City Corning State NY Zip Code 14830

Purpose of Disbursement
Campaign Contribution

Category/Type: 011

Candidate Name
Eric Massa

Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 29

Disbursement For: 2008
[X] Primary [ ] General
[ ] Other (specify) ▼

Transaction ID: D280051
Date of Disbursement
MM 09 / DD 07 / YYYY 2007

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

TOTAL This Period (last page this line number only) ..... ▶ **5000.00**