

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
GREEN PARTY OF NEW YORK STATE

ADDRESS (number and street) 7988 Van Amburg Road
 Check if different than previously reported. (ACC)
Hammondsport NY 14840

2. **FEC IDENTIFICATION NUMBER** C00318907
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 (12G)
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 01 01 2009 through 06 30 2009

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 Rachel Treichler

Signature of Treasurer Electronically Filed by Rachel Treichler Date 07 31 2009

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GREEN PARTY OF NEW YORK STATE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		504.83
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	504.83									
(c) Total Receipts (from Line 19)	9407.14	9407.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9911.97	9911.97								
7. Total Disbursements (from Line 31)	1845.47	1845.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8066.50	8066.50								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	3800.00									
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
GREEN PARTY OF NEW YORK STATE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	3994.22	3994.22
(ii) Unitemized	2473.39	2473.39
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6467.61	6467.61
(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)	6467.61	6467.61
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2939.53	2939.53
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))	9407.14	9407.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9407.14	9407.14

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.....	1845.47	1845.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1845.47	1845.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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	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))..	1845.47	1845.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1845.47	1845.47

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)	6467.61	6467.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6467.61	6467.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1845.47	1845.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1845.47	1845.47

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

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

FOR LINE NUMBER: PAGE 6 / 12
(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)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
Mr. Paul T Culley

Mailing Address 60 Pine Hill Drive

City State Zip Code
Alfred NY 14802

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2009

Transaction ID: SA11AI.5136

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. David J Cyr

Mailing Address P.O. Box 29

City State Zip Code
Delhi NY 13753-0029

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

Name of Employer Self Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.5104

Amount of Each Receipt this Period
365.00

C. Full Name (Last, First, Middle Initial)
Margaret A Human

Mailing Address 81 Prospect St

City State Zip Code
New Paltz NY 12561

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: SA11AI.5037

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1365.00**

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)	PAGE 7 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A.

Full Name (Last, First, Middle Initial)
Margaret A Human

Mailing Address 81 Prospect St

City State Zip Code
New Paltz NY 12561

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2194.22

Date of Receipt M M / D D / Y Y Y Y
04 / 13 / 2009

Transaction ID: SA11AI.5049

Amount of Each Receipt this Period 1694.22

B.

Full Name (Last, First, Middle Initial)
Mr John Hussey

Mailing Address PO Box 86

City State Zip Code
Delhi NY 13753

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

Name of Employer self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
05 / 18 / 2009

Transaction ID: SA11AI.5063

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jack Taylor

Mailing Address 157 East 18 Street

City State Zip Code
New York NY 10003

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

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
05 / 18 / 2009

Transaction ID: SA11AI.5084

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **2194.22**

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 / 12
	(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)
GREEN PARTY OF NEW YORK STATE

A.

Full Name (Last, First, Middle Initial) Contributions Unitemized	Date of Receipt
Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code	<input type="text"/> 0 2 / <input type="text"/> 1 2 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee.	Transaction ID: SA11AI.5046
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) ▼	<input type="text"/> 260.00
Aggregate Year-to-Date ▼	<input type="text"/> 260.00

B.

Full Name (Last, First, Middle Initial) Contributions Unitemized	Date of Receipt
Mailing Address	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code	<input type="text"/> 0 5 / <input type="text"/> 1 8 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee.	Transaction ID: SA11AI.5112
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) ▼	<input type="text"/> 175.00
Aggregate Year-to-Date ▼	<input type="text"/> 435.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 435.00
TOTAL This Period (last page this line number only)	<input type="text"/> 3994.22

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

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

FOR LINE NUMBER: PAGE 9 / 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City Larchmont State NY Zip Code 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1039.53

Date of Receipt: 01 / 05 / 2009
Transaction ID: SA17.5172
 Amount of Each Receipt this Period: 1039.53
 repayment of amount owed

B. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City Larchmont State NY Zip Code 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: SA17.5173
 Amount of Each Receipt this Period: 475.00
 repayment of amount owed

C. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City Larchmont State NY Zip Code 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: 04 / 25 / 2009
Transaction ID: SA17.5174
 Amount of Each Receipt this Period: 475.00
 repayment of amount owed

SUBTOTAL of Receipts This Page (optional) ► 1989.53

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 10 / 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 8 / 2 0 0 9

Transaction ID: SA17.5175

Amount of Each Receipt this Period
475.00

repayment of amount owed

B. Full Name (Last, First, Middle Initial)
Mr James Maceda

Mailing Address 814 D Larchmont Acres

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 9

Transaction ID: SA17.5176

Amount of Each Receipt this Period
475.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ► **2939.53**

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)
GREEN PARTY OF NEW YORK STATE

A.	Full Name (Last, First, Middle Initial) Priority Press	Transaction ID: SB21B.5192 Date of Disbursement
	Mailing Address TEC Street 61 B	<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Hicksville State NY Zip Code 11801	Amount of Each Disbursement this Period
	Purpose of Disbursement fundraising mailing Candidate Name	<input type="text" value="828.32"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="003"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Shalimar Restaurant	Transaction ID: SB21B.5188 Date of Disbursement
	Mailing Address 35 Central Avenue	<input type="text" value="02"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Albany State NY Zip Code 12210	Amount of Each Disbursement this Period
	Purpose of Disbursement lunch for state committee meeting Candidate Name	<input type="text" value="257.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Shalimar Restaurant	Transaction ID: SB21B.5190 Date of Disbursement
	Mailing Address 35 Central Avenue	<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Albany State NY Zip Code 12210	Amount of Each Disbursement this Period
	Purpose of Disbursement state committee lunch Candidate Name	<input type="text" value="285.93"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1371.25"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1371.25"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 12	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
GREEN PARTY OF NEW YORK STATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr James Maceda			Nature of Debt (Purpose): Repayment of amounts taken
Mailing Address 814 D Larchmont Acres			
City Larchmont	State NY	ZIP Code 10538	

Outstanding Balance Beginning This Period		Transaction ID: SD9.5012	
6739.53			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	2939.53	3800.00	

1) SUBTOTALS This Period This Page (optional).....	▶	3800.00
2) TOTALS This Period (last page this line number only).....	▶	3800.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	3800.00