

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

ADDRESS (number and street) **1032 15TH STREET NW**  
**#128**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00487181** 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 Year-End 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  /  /  in the State of

5. Covering Period  /  /  2019 through  /  /  2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Kayan, Mert, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Kayan, Mert, , ,* [Electronically Filed] Date  /  /  2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="7077.83"/>	<input type="text" value="7077.83"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7077.83"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="21625.00"/>	<input type="text" value="21625.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="28702.83"/>	<input type="text" value="28702.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25107.42"/>	<input type="text" value="25107.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3595.41"/>	<input type="text" value="3595.41"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

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

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).....	19625.00	19625.00
(ii) Unitemized .....	2000.00	2000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21625.00	21625.00
(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) .....	21625.00	21625.00
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	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.).....	0.00	0.00
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 Transfers (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)).....▶	21625.00	21625.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21625.00	21625.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	2342.42	2342.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2342.42	2342.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22265.00	22265.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	500.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	25107.42	25107.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25107.42	25107.42

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21625.00	21625.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21625.00	21625.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2342.42	2342.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2342.42	2342.42

**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 6 OF 16
<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)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Baybars, Ilker, , ,</b>			Date of Receipt MM / DD / YYYY 05 / 28 / 2019 <b>Transaction ID : SA11AI.4143</b>
Mailing Address 5133 Forbes Ave.			Amount of Each Receipt this Period 250.00
City Pittsburgh	State PA	Zip Code 15213	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Carnegie Mellon		Occupation (for Individual) Deputy Dean Emeritus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Cinar, Ali, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 20 / 2019 <b>Transaction ID : SA11AI.4108</b>
Mailing Address 88 Vinton St.			Amount of Each Receipt this Period 500.00
City E. Atlantic Beach	State NY	Zip Code 11561	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Team of America		Occupation (for Individual) Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cinar, Ali, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2019 <b>Transaction ID : SA11AI.4113</b>
Mailing Address 88 Vinton St.			Amount of Each Receipt this Period 500.00
City E. Atlantic Beach	State NY	Zip Code 11561	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Team of America		Occupation (for Individual) Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<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: (check only one)	PAGE 7 OF 16
<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)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

**A. Cinar, Ali, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 88 Vinton St.  
 City E. Atlantic Beach State NY Zip Code 11561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Team of America Occupation (for Individual) Chief Marketing Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 21 / 2019  
**Transaction ID : SA11AI.4120**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Evinch, Gunay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1132 Willowbrook Dr.  
 City Potomac State MD Zip Code 20854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Saltzman & Evinch, PLLC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 28 / 2019  
**Transaction ID : SA11AI.4111**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Kantarci, Ibrahim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 Albany St.  
 City Boston State MA Zip Code 02118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dentist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2019  
**Transaction ID : SA11AI.4121**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<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: (check only one)	PAGE 8 OF 16
<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)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

**A. Kayan, Mert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9305 Ocala St.  
 City Silver Spring State MD Zip Code 20901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fannie Mae Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 08 / 2019**  
**Transaction ID : SA11AI.4102**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Kayan, Mert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9305 Ocala St.  
 City Silver Spring State MD Zip Code 20901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fannie Mae Occupation (for Individual) Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **03 / 25 / 2019**  
**Transaction ID : SA11AI.4110**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. McCurdy, G., Lincoln, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5425 21st St. N  
 City Arlington State VA Zip Code 22205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Turkish Coalition of America Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 08 / 2019**  
**Transaction ID : SA11AI.4100**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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: (check only one)	PAGE 9 OF 16
<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)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

**A. McCurdy, G., Lincoln, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5425 21st St. N  
 City Arlington State VA Zip Code 22205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Turkish Coalition of America Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 06 / 20 / 2019  
**Transaction ID : SA11AI.4147**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**B. Ozmen, Eren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 Salomon Cir.  
 City Sparks State NV Zip Code 89434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sierra Nevada Corporation Occupation (for Individual) President/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11AI.4106**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Ozmen, Faith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 444 Salomon Cir.  
 City Sparks State NV Zip Code 89434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sierra Nevada Corporation Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 30 / 2019  
**Transaction ID : SA11AI.4104**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10125.00
<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 10 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Turkbas, Deniz, , ,

Mailing Address 88 Vinton St.

City Long Beach    State NY    Zip Code 11561

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

Name of Employer (for Individual) Turkbas Law    Occupation (for Individual) Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2019

**Transaction ID : SA11A1.4116**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City    State    Zip Code

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	19625.00

# 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"/> 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)

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial)

**A. Huckaby Davis Lisker**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2019

Mailing Address 228 S Washington St.  
Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Compliance Consulting

FEC Identification Number

**C**

**Transaction ID : SB21B.4168**

Amount of Each Disbursement this Period

1956.25

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paypal**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2019

Mailing Address 2211 North First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Online Processing

FEC Identification Number

**C**

**Transaction ID : SB21B.4174**

Amount of Each Disbursement this Period

59.18

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

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

2015.43

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

2015.43

**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 checked="" type="checkbox"/> 23	<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)

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial)

**A. CITIZENS FOR BOYLE**

Mailing Address PO BOX 11545

City PHILADELPHIA State PA Zip Code 19116

Purpose of Disbursement  
Political Contribution

Candidate Name  
**BOYLE, BRENDAN F, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2019

FEC Identification Number

**C** C00543363

**Transaction ID : SB23.4196**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COHEN FOR CONGRESS**

Mailing Address 349 KENILWORTH PLACE

City MEMPHIS State TN Zip Code 38112

Purpose of Disbursement  
Political Contribution

Candidate Name  
**COHEN, STEPHEN IRA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: TN District: 09

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2019

FEC Identification Number

**C** C00422980

**Transaction ID : SB23.4183**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CONOR LAMB FOR CONGRESS**

Mailing Address PO BOX 10381

City PITTSBURGH State PA Zip Code 15234

Purpose of Disbursement  
Political Contribution

Candidate Name  
**LAMB, CONOR, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 17

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2019

FEC Identification Number

**C** C00657411

**Transaction ID : SB23.4202**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

1500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF CHERI BUSTOS**

Mailing Address PO BOX 65322

City  
WASHINGTON

State  
DC

Zip Code  
20035

Purpose of Disbursement  
Political Contribution

Candidate Name

**BUSTOS, CHERI, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

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

FEC Identification Number

**C** C00498568

**Transaction ID : SB23.4199**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. GUY FOR CONGRESS**

Mailing Address P.O. BOX 23177

City  
PITTSBURGH

State  
PA

Zip Code  
15222

Purpose of Disbursement  
Political Contribution

Candidate Name

**RESCHENTHALER, GUY MR., , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: PA District: 14

Date of Disbursement

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

FEC Identification Number

**C** C00657833

**Transaction ID : SB23.4180**

Amount of Each Disbursement this Period

2265.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JAMIE RASKIN FOR CONGRESS**

Mailing Address P.O. BOX 5418

City  
TAKOMA PARK

State  
MD

Zip Code  
20913

Purpose of Disbursement  
Political Contribution

Candidate Name

**RASKIN, JAMIE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

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

FEC Identification Number

**C** C00575126

**Transaction ID : SB23.4208**

Amount of Each Disbursement this Period

500.00

Memo Item

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

3265.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial)

**A. MIKIE SHERRILL FOR CONGRESS**

Mailing Address P.O. BOX 43032

City  
MONTCLAIR

State  
NJ

Zip Code  
07043

Purpose of Disbursement  
Political Contribution

Candidate Name

**SHERRILL, MIKIE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NJ District: 11

Date of Disbursement

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

FEC Identification Number

**C** C00640003

**Transaction ID : SB23.4211**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 FIRST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2019  
 Primary  General  
 Other (specify) Other

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820

**Transaction ID : SB23.4178**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SHAHEEN FOR SENATE**

Mailing Address PO BOX 75357

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
Political Contribution

Candidate Name

**SHAHEEN, JEANNE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NH District: 00

Date of Disbursement

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

FEC Identification Number

**C** C00457325

**Transaction ID : SB23.4190**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

11000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial) <b>A. TEAM GRAHAM INC</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address PO BOX 1801		FEC Identification Number C00458828 <b>Transaction ID : SB23.4186</b> Amount of Each Disbursement this Period 5000.00
City COLUMBIA	State SC	Zip Code 29202
Purpose of Disbursement Political Contribution		Category/Type
Candidate Name <b>GRAHAM, LINDSEY O, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District: 00	

Full Name (Last, First, Middle Initial) <b>B. THE BILL KEATING COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2019
Mailing Address P.O. BOX 3065		FEC Identification Number C00479063 <b>Transaction ID : SB23.4193</b> Amount of Each Disbursement this Period 1000.00
City BUZZARDS BAY	State MA	Zip Code 02532
Purpose of Disbursement Political Contribution		Category/Type
Candidate Name <b>KEATING, WILLIAM RICHARD, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MA	District: 09	

Full Name (Last, First, Middle Initial) <b>C. TOM MALINOWSKI FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address PO BOX 58		FEC Identification Number C00656686 <b>Transaction ID : SB23.4205</b> Amount of Each Disbursement this Period 500.00
City MARTINSVILLE	State NJ	Zip Code 08836
Purpose of Disbursement Political Contribution		Category/Type
Candidate Name <b>MALINOWSKI, TOM, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22265.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

**TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)**

Full Name (Last, First, Middle Initial)

**A. Valderama for Delegate**

Mailing Address PO Box 1165

City  
Fort Washington

State  
MD

Zip Code  
20749

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2019  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 07 / 2019

FEC Identification Number

C

Transaction ID : SB29.4176

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

500.00

500.00