

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.

Taking Action For Suffolk County

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Ervin, Robert, Francis, ,

Type or Print Name of Treasurer

Signature of Treasurer Ervin, Robert, Francis, , [Electronically Filed] Date / /

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

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Taking Action For Suffolk County

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="2018"/>		5985.29
(b) Cash on Hand at Beginning of Reporting Period.....	66772.11	
(c) Total Receipts (from Line 19)	413963.26	525165.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	480735.37	531150.80
7. Total Disbursements (from Line 31).....	120072.59	170488.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	360662.78	360662.78
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

Taking Action For Suffolk County

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).....	410698.53	513414.49
(ii) Unitemized	3264.73	11296.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	413963.26	524710.51
(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)	413963.26	524710.51
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	455.00
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)).....▶	413963.26	525165.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	413963.26	525165.51

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	91608.15	142023.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	91608.15	142023.58
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 Expenditures (use Schedule E)	27656.22	27656.22
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).....	808.22	808.22
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)) ..	120072.59	170488.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120072.59	170488.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	413963.26	524710.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	413963.26	524710.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	91608.15	142023.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	455.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	91608.15	141568.58

**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 70
<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)
Taking Action For Suffolk County

A. Brennan, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Robin Hill Lane
 City Saint James State NY Zip Code 11780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNY Stony Brook Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.19

Date of Receipt 08 / 24 / 2018
Transaction ID : SA11AI.5553
 Amount of Each Receipt this Period 209.19
 Memo Item

B. daniel, ana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address po box 146
 City sagaponack State NY Zip Code 11962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 13 / 2018
Transaction ID : SA11AI.5417
 Amount of Each Receipt this Period 100.00
 Memo Item
 Conduit: ActBlue

C. daniel, ana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address po box 146
 City sagaponack State NY Zip Code 11962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 08 / 13 / 2018
Transaction ID : SA11AI.5479
 Amount of Each Receipt this Period 100.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....	409.19
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 OF 70
	<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	

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)
Taking Action For Suffolk County

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
daniel, ana, , ,

Mailing Address po box 146

City sagaponack State NY Zip Code 11962

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

Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1400.00

Date of Receipt
09 / 13 / 2018
Transaction ID : SA11AI.5488

Amount of Each Receipt this Period
100.00

Memo Item
Conduit: ActBlue

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

Mailing Address 51 Tuthill Drive POB 568

City Shelter Island State NY Zip Code 11964

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

Name of Employer (for Individual) Shelter Island Risk Services Occupation (for Individual) consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
07 / 28 / 2018
Transaction ID : SA11AI.5462

Amount of Each Receipt this Period
50.00

Memo Item
Conduit: ActBlue

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

Mailing Address 51 Tuthill Drive POB 568

City Shelter Island State NY Zip Code 11964

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

Name of Employer (for Individual) Shelter Island Risk Services Occupation (for Individual) consultant

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
08 / 28 / 2018
Transaction ID : SA11AI.5484

Amount of Each Receipt this Period
50.00

Memo Item
Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....	200.00
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 OF 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
Taking Action For Suffolk County

A. Denning, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 51 Tuthill Drive POB 568
 City Shelter Island State NY Zip Code 11964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Shelter Island Risk Services Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11AI.5521
 Amount of Each Receipt this Period 50.00
 Memo Item
 Conduit: ActBlue

B. Friedman, Joni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO box 231
 City New suffolk State NY Zip Code 11956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Massage Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2018
Transaction ID : SA11AI.5528
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Conduit: ActBlue

C. Friends of Cindy Morris
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Wellington Drive
 City Stony Brook State NY Zip Code 11790
 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 ▼ 414.34

Date of Receipt 08 / 16 / 2018
Transaction ID : SA11AI.5540
 Amount of Each Receipt this Period 414.34
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5464.34
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 9 OF 70
	<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	

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)
Taking Action For Suffolk County

A. Gill, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12030 New Suffolk Ave. P.O. Box 50
 City Cutchogue State NY Zip Code 11935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2018
Transaction ID : SA11AI.5514
 Amount of Each Receipt this Period 250.00
 Memo Item
 Conduit: ActBlue

B. Gordon, Diana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 152 6th Street
 City Greenport State NY Zip Code 11944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.94

Date of Receipt 07 / 17 / 2018
Transaction ID : SA11AI.5418
 Amount of Each Receipt this Period 100.00
 Memo Item
 Conduit: ActBlue

C. Gotbaum, Betsy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 Central Park west
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2018
Transaction ID : SA11AI.5448
 Amount of Each Receipt this Period 250.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 10 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Taking Action For Suffolk County

A. Hemmer, F Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Overlook Lane
 City Sag Harbor State NY Zip Code 11963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) F. Michael Hemmer LS P.C. Occupation (for Individual) Land Surveyor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11AI.5522
 Amount of Each Receipt this Period 25.00
 Memo Item
 Conduit: ActBlue

B. Hoguet, Constance M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 East 68th Street Apt. 12 A
 City New York State NY Zip Code 10065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2018
Transaction ID : SA11AI.5466
 Amount of Each Receipt this Period 500.00
 Memo Item
 Conduit: ActBlue

C. moore, wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 sterling place
 City brooklyn State NY Zip Code 11217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brooklyn Country Day Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 02 / 2018
Transaction ID : SA11AI.5415
 Amount of Each Receipt this Period 3000.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....▶	3525.00
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 11 OF 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
Taking Action For Suffolk County

A. Wander, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Schooner Cove
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Renaissance Technologies LLC Occupation (for Individual) Technical Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 130000.00

Date of Receipt **07 / 02 / 2018**
Transaction ID : SA11AI.5531
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. Wander, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Schooner Cove
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Renaissance Technologies LLC Occupation (for Individual) Technical Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 180000.00

Date of Receipt **08 / 08 / 2018**
Transaction ID : SA11AI.5539
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. Wander, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Schooner Cove
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Renaissance Technologies LLC Occupation (for Individual) Technical Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230000.00

Date of Receipt **09 / 04 / 2018**
Transaction ID : SA11AI.5559
 Amount of Each Receipt this Period 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150000.00
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 12 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Taking Action For Suffolk County

A. Wander, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Schooner Cove
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Renaissance Technologies LLC Occupation (for Individual) Technical Staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480000.00

Date of Receipt 09 / 25 / 2018
Transaction ID : SA11AI.5552
 Amount of Each Receipt this Period 250000.00
 Memo Item

B. Williams, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 Shore Road
 City East Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 17 / 2018
Transaction ID : SA11AI.5433
 Amount of Each Receipt this Period 250.00
 Memo Item
 Conduit: ActBlue

C. Williams, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 Shore Road
 City East Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 23 / 2018
Transaction ID : SA11AI.5501
 Amount of Each Receipt this Period 250.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....	250500.00
TOTAL This Period (last page this line number only).....	410698.53

**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 13 OF 70
<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)
Taking Action For Suffolk County

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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
09		30		2018

Transaction ID : SA11C.5560

Amount of Each Receipt this Period

12494.25

Memo Item
 Total through conduit this reporting period; ; PAC limit not affected.

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

--

Memo Item

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

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5595
Amount of Each Disbursement this Period
119.49

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5596
Amount of Each Disbursement this Period
0.99

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5597
Amount of Each Disbursement this Period
3.95

Memo Item

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

124.43

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)

<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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.5598
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.5599
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.5600
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"/> 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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5601**
Amount of Each Disbursement this Period
25.12

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 27 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5602**
Amount of Each Disbursement this Period
11.48

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5603**
Amount of Each Disbursement this Period
2.38

Memo Item

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

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

38.98

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5604**
Amount of Each Disbursement this Period
19.75

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5605**
Amount of Each Disbursement this Period
7.90

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2018

FEC Identification Number

C
Transaction ID : **SB21B.5606**
Amount of Each Disbursement this Period
0.99

Memo Item

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

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

28.64

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 05 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5607 Amount of Each Disbursement this Period [] 1.39	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 06 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5608 Amount of Each Disbursement this Period [] 0.40	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 10 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5609 Amount of Each Disbursement this Period [] 3.95	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: []	District: []		

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

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

[] 5.74
[]

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City
Cambridge

State
MA

Zip Code
02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5610
Amount of Each Disbursement this Period
3.95

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City
Cambridge

State
MA

Zip Code
02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5611
Amount of Each Disbursement this Period
3.95

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City
Cambridge

State
MA

Zip Code
02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5612
Amount of Each Disbursement this Period
1.39

Memo Item

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

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

9.29

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 28 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5613 Amount of Each Disbursement this Period [] 1.98	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 05 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5614 Amount of Each Disbursement this Period [] 0.99	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 07 / 2018	
Mailing Address P.O. Box 382110		FEC Identification Number C [] Transaction ID : SB21B.5615 Amount of Each Disbursement this Period [] 3.95	
City Cambridge	State MA	Zip Code 02238-2110	Category/ Type []
Purpose of Disbursement donation processing		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6.92
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 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

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)
Taking Action For Suffolk County

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5616**

Amount of Each Disbursement this Period: 3.95

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5617**

Amount of Each Disbursement this Period: 27.03

Memo Item

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5618**

Amount of Each Disbursement this Period: 13.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 44.23

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"/> 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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5619

Amount of Each Disbursement this Period

1.39

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5620

Amount of Each Disbursement this Period

4.95

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
donation processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5621

Amount of Each Disbursement this Period

197.50

Memo Item

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

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

203.84

**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

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)
Taking Action For Suffolk County

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement donation processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5622

Amount of Each Disbursement this Period: 3.95

Memo Item

B. Benson Consulting Agency, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 8 Wellington Drive

City Stony Brook State NY Zip Code 11790

Purpose of Disbursement fundraising, strategy general consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5573

Amount of Each Disbursement this Period: 3000.00

Memo Item

C. Benson Consulting Agency, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 8 Wellington Drive

City Stony Brook State NY Zip Code 11790

Purpose of Disbursement fundraising, strategy general consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5574

Amount of Each Disbursement this Period: 3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6003.95

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"/> 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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. Benson Consulting Agency, LLC		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018	
Mailing Address 8 Wellington Drive		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5575 Amount of Each Disbursement this Period 3000.00	
City Stony Brook	State NY	Zip Code 11790	Category/ Type
Purpose of Disbursement fundraising, strategy general consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B. GLOBAL STRATEGY GROUP, LLC		Date of Disbursement MM / DD / YYYY 09 / 14 / 2018	
Mailing Address 215 Park Avenue South, 15th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5580 Amount of Each Disbursement this Period 35000.00	
City New York	State NY	Zip Code 10003	Category/ Type
Purpose of Disbursement polling for NY1 and NY2			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) C. Greenwald Doherty LLP		Date of Disbursement MM / DD / YYYY 07 / 23 / 2018	
Mailing Address 30 Ramland Road Suite 201		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5569 Amount of Each Disbursement this Period 3000.00	
City Orangeburg	State NY	Zip Code 10962	Category/ Type
Purpose of Disbursement labor law advice			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	41000.00
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 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

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)

Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 500 Third St
Suite 405

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
payroll services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5577
Amount of Each Disbursement this Period
45.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 500 Third St
Suite 405

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Payroll processing: see below

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5646
Amount of Each Disbursement this Period
2808.13

Memo Item

Full Name (Last, First, Middle Initial)

C. Erwin, Bryan, , ,

Mailing Address 2320 New Suffolk Avenue

City Mattituck State NY Zip Code 11952

Purpose of Disbursement
7/31 payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5646.
Amount of Each Disbursement this Period
2500.00

Memo Item

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

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

2853.13

**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

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)
Taking Action For Suffolk County

A. Internal Revenue Service

Full Name (Last, First, Middle Initial)

Mailing Address 1111 Constitution Avenue Northwest

City Washington State DC Zip Code 20224

Purpose of Disbursement FICA and FUTA taxes

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5646.1

Amount of Each Disbursement this Period: 206.25

Memo Item

B. New York State Department of Taxation and Finance

Full Name (Last, First, Middle Initial)

Mailing Address STATE PROCESSING CENTER
PO BOX 61000

City Albany State NY Zip Code 12261

Purpose of Disbursement SUTA taxes

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
07 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5646.2

Amount of Each Disbursement this Period: 101.88

Memo Item

C. Gusto

Full Name (Last, First, Middle Initial)

Mailing Address 500 Third St
Suite 405

City San Francisco State CA Zip Code 94107

Purpose of Disbursement payroll services

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5578

Amount of Each Disbursement this Period: 69.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 69.00

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 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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 500 Third St
Suite 405

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Payroll processing: see below

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5652

Amount of Each Disbursement this Period

2805.13

Memo Item

Full Name (Last, First, Middle Initial)

B. Erwin, Bryan, , ,

Mailing Address 2320 New Suffolk Avenue

City Mattituck State NY Zip Code 11952

Purpose of Disbursement
8/31 payroll

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5652.C

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address 1111 Constitution Avenue Northwest

City Washington State DC Zip Code 20224

Purpose of Disbursement
FICA and FUTA tax

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5652.

Amount of Each Disbursement this Period

203.25

Memo Item

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

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

2805.13

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. New York State Department of Taxation and Finance

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

Mailing Address STATE PROCESSING CENTER
PO BOX 61000

FEC Identification Number

C []
Transaction ID : SB21B.5652.1
Amount of Each Disbursement this Period
[] 101.88

City Albany State NY Zip Code 12261

Purpose of Disbursement
SUTA tax

[]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2018

Mailing Address 500 Third St
Suite 405

FEC Identification Number

C []
Transaction ID : SB21B.5579
Amount of Each Disbursement this Period
[] 111.00

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
payroll services

[]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Gusto

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2018

Mailing Address 500 Third St
Suite 405

FEC Identification Number

C []
Transaction ID : SB21B.5656
Amount of Each Disbursement this Period
[] 2793.13

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Payroll processing: see below

[]
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

[] 2904.13

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"/> 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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. Erwin, Bryan, , ,		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018	
Mailing Address 2320 New Suffolk Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5656.1 Amount of Each Disbursement this Period 2500.00	
City Mattituck	State NY	Zip Code 11952	Category/ Type
Purpose of Disbursement 9/28 payroll			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018	
Mailing Address 1111 Constitution Avenue Northwest		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5656.1 Amount of Each Disbursement this Period 191.25	
City Washington	State DC	Zip Code 20224	Category/ Type
Purpose of Disbursement FICA tax			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) C. New York State Department of Taxation and Finance		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018	
Mailing Address STATE PROCESSING CENTER PO BOX 61000		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5656.1 Amount of Each Disbursement this Period 101.88	
City Albany	State NY	Zip Code 12261	Category/ Type
Purpose of Disbursement SUTA tax			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 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

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)
Taking Action For Suffolk County

A. Hershkowitz, Shoshana, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10 Tracker Lane

City South Setauket State NY Zip Code 11720

Purpose of Disbursement Outreach and social media

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5564

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Hershkowitz, Shoshana, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10 Tracker Lane

City South Setauket State NY Zip Code 11720

Purpose of Disbursement Outreach and social media

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5566

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Hershkowitz, Shoshana, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10 Tracker Lane

City South Setauket State NY Zip Code 11720

Purpose of Disbursement Outreach and social media

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5567

Amount of Each Disbursement this Period: 2500.00

Memo Item

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

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

7500.00

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. MCB Consulting

Mailing Address PO Box 855

City Southampton State NY Zip Code 11969

Purpose of Disbursement fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5626

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MCB Consulting

Mailing Address PO Box 855

City Southampton State NY Zip Code 11969

Purpose of Disbursement fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5627

Amount of Each Disbursement this Period

9000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. New York State Insurance Fund

Mailing Address 1 Watervliet Avenue Ext.

City Albany State NY Zip Code 12206

Purpose of Disbursement WC policy

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5645

Amount of Each Disbursement this Period

630.94

Memo Item

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

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

12630.94

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. Peconic Advisors, LLC			Date of Disbursement MM / DD / YYYY 07 / 18 / 2018	
Mailing Address 300 Bowie Street Unit 3206			FEC Identification Number C [] Transaction ID : SB21B.5561 Amount of Each Disbursement this Period [] 487.50	
City Austin	State TX	Zip Code 78703		
Purpose of Disbursement Accounting services		Candidate Name		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) B. Peconic Advisors, LLC			Date of Disbursement MM / DD / YYYY 08 / 01 / 2018	
Mailing Address 300 Bowie Street Unit 3206			FEC Identification Number C [] Transaction ID : SB21B.5562 Amount of Each Disbursement this Period [] 1140.00	
City Austin	State TX	Zip Code 78703		
Purpose of Disbursement Accounting services		Candidate Name		Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) C. Peconic Advisors, LLC			Date of Disbursement MM / DD / YYYY 09 / 04 / 2018	
Mailing Address 300 Bowie Street Unit 3206			FEC Identification Number C [] Transaction ID : SB21B.5563 Amount of Each Disbursement this Period [] 1266.25	
City Austin	State TX	Zip Code 78703		
Purpose of Disbursement Accounting services		Candidate Name		Memo Item <input type="checkbox"/>
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:		

SUBTOTAL of Disbursements This Page (optional).....	[] 2893.75
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"/> 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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. Perkins Coie LLP		Date of Disbursement MM / DD / YYYY 07 / 18 / 2018	
Mailing Address P.O. Box 24643		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5568 Amount of Each Disbursement this Period [REDACTED] 1228.50	
City Seattle	State WA	Zip Code 98124	Category/ Type [REDACTED]
Purpose of Disbursement legal advice		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Perkins Coie LLP		Date of Disbursement MM / DD / YYYY 08 / 15 / 2018	
Mailing Address P.O. Box 24643		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5571 Amount of Each Disbursement this Period [REDACTED] 263.25	
City Seattle	State WA	Zip Code 98124	Category/ Type [REDACTED]
Purpose of Disbursement legal advice		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Perkins Coie LLP		Date of Disbursement MM / DD / YYYY 09 / 21 / 2018	
Mailing Address P.O. Box 24643		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5572 Amount of Each Disbursement this Period [REDACTED] 263.25	
City Seattle	State WA	Zip Code 98124	Category/ Type [REDACTED]
Purpose of Disbursement legal advice		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1755.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial) A. Shoeboxed.com		Date of Disbursement MM / DD / YYYY 07 / 10 / 2018
Mailing Address 512 S Mangum Street Suite 402		FEC Identification Number C Transaction ID : SB21B.5589 Amount of Each Disbursement this Period 39.00
City Durham	State NC	
Zip Code 27701	Purpose of Disbursement	Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) B. Shoeboxed.com		Date of Disbursement MM / DD / YYYY 08 / 08 / 2018
Mailing Address 512 S Mangum Street Suite 402		FEC Identification Number C Transaction ID : SB21B.5590 Amount of Each Disbursement this Period 39.00
City Durham	State NC	
Zip Code 27701	Purpose of Disbursement	Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) C. Shoeboxed.com		Date of Disbursement MM / DD / YYYY 09 / 10 / 2018
Mailing Address 512 S Mangum Street Suite 402		FEC Identification Number C Transaction ID : SB21B.5591 Amount of Each Disbursement this Period 39.00
City Durham	State NC	
Zip Code 27701	Purpose of Disbursement	Memo Item <input type="checkbox"/>
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:		

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

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

117.00

**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

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)
Taking Action For Suffolk County

A. Shoshana Hershkowitz

Full Name (Last, First, Middle Initial)

Mailing Address 10 Tracker Lane

City South Setauket State NY Zip Code 11720

Purpose of Disbursement reimbursement for postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5584

Amount of Each Disbursement this Period: 757.90

Memo Item

B. Tri Star Graphics, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 178

City Garden City State NY Zip Code 11530

Purpose of Disbursement North Fork and Hamptons mailings

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5576

Amount of Each Disbursement this Period: 8898.80

Memo Item

C. United States Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 450 NY-25A

City East Setauket State NY Zip Code 11733

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5588

Amount of Each Disbursement this Period: 420.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10076.70
TOTAL This Period (last page this line number only).....▶	91098.54

**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

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)
Taking Action For Suffolk County

Full Name (Last, First, Middle Initial)

A. Tri Star Graphics, Inc.

Mailing Address P.O. Box 178

City Garden City State NY Zip Code 11530

Purpose of Disbursement
Stickers for NYS candidates

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
09 / 26 / 2018

FEC Identification Number

C

Transaction ID : SB29.5676
Amount of Each Disbursement this Period

808.22

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

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)..... ▶

808.22

808.22

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DeVine, Kelly, , , Memo Item
Mailing Address 119 Jane Avenue
City Port Jefferson State NY Zip Code 11777
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 05 / 2018
Amount 457.50
Transaction ID : SE.5253
Date of Disbursement or Obligation 08 / 07 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee DeVine, Kelly, , , Memo Item
Mailing Address 119 Jane Avenue
City Port Jefferson State NY Zip Code 11777
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 625.50
Transaction ID : SE.5262
Date of Disbursement or Obligation 08 / 24 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1083.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee DeVine, Kelly, , , Memo Item
Mailing Address 119 Jane Avenue
City Port Jefferson State NY Zip Code 11777
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001

Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 682.50
Transaction ID : SE.5274
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House President Senate State: NY District: 01

Disbursement For: Primary General Other (specify)
Calendar Year-To-Date Per Election for Office Sought 11998.63

Full Name of Payee DeVine, Kelly, , , Memo Item
Mailing Address 119 Jane Avenue
City Port Jefferson State NY Zip Code 11777
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001

Date of Public Distribution/Dissemination 09 / 06 / 2018
Amount 210.00
Transaction ID : SE.5286
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House President Senate State: NY District: 01

Disbursement For: Primary General Other (specify)
Calendar Year-To-Date Per Election for Office Sought 24092.24

(a) SUBTOTAL of Itemized Independent Expenditures 892.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11 / 01 / 2018
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00637645 </div>
--	---

Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item DeVine, Kelly, , ,	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 18 / 2018						
Mailing Address 119 Jane Avenue	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 405.00 </div> Transaction ID : SE.5667 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 18 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Port Jefferson</td> <td>NY</td> <td>11777</td> </tr> </table>		City	State	Zip Code	Port Jefferson	NY	11777
City		State	Zip Code				
Port Jefferson	NY	11777					
Purpose of Expenditure Canvassing in NY2 for Liuba							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Shirley, Liuba, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NY						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2106.53 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Dwyer, Emily, , ,	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 05 / 2018						
Mailing Address 17 Springbriar Ln	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 480.00 </div> Transaction ID : SE.5254 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 07 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Centereach</td> <td>NY</td> <td>11720</td> </tr> </table>		City	State	Zip Code	Centereach	NY	11720
City		State	Zip Code				
Centereach	NY	11720					
Purpose of Expenditure Canvassing in NY1 for Perry Gershon							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose GERSHON, PERRY, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NY						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8057.33 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 885.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Dwyer, Emily, , , Memo Item
Mailing Address 17 Springbriar Ln
City Centereach State NY Zip Code 11720
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08/19/2018
Amount 573.75
Transaction ID : SE.5263
Date of Disbursement or Obligation 08/24/2018
Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 10126.12
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Facebook, Inc. Memo Item
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Trump - Zeldin Bear ad Category/Type 004
Date of Public Distribution/Dissemination 07/02/2018
Amount 181.66
Transaction ID : SE.5244
Date of Disbursement or Obligation 07/02/2018
Name of Federal Candidate: ZELDIN, LEE M, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 181.66
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 755.41
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11/01/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook, Inc.
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Trump - Zeldin Bear ad
Category/Type 004
Name of Federal Candidate: ZELDIN, LEE M, ,
Office Sought: House District: 01 State: NY
Disbursement For: General 2018
Amount 18.33
Transaction ID: SE.5245
Date of Disbursement or Obligation 07/02/2018

Full Name of Payee Facebook, Inc.
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Trump - Zeldin Bear ad
Category/Type 004
Name of Federal Candidate: ZELDIN, LEE M, ,
Office Sought: House District: 01 State: NY
Disbursement For: General 2018
Amount 249.13
Transaction ID: SE.5246
Date of Disbursement or Obligation 07/30/2018

(a) SUBTOTAL of Itemized Independent Expenditures 267.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11/01/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook, Inc. Memo Item

Date of Public Distribution/Dissemination 08 / 01 / 2018

Mailing Address 1 Hacker Way

Amount 62.09

City Menlo Park State CA Zip Code 94025

Transaction ID : SE.5247

Purpose of Expenditure Trump - Zeldin Bear ad Category/Type 004

Date of Disbursement or Obligation 08 / 01 / 2018

Name of Federal Candidate: ZELDIN, LEE M, , Support Oppose

Office Sought: House District: 01 State: NY

Calendar Year-To-Date Per Election for Office Sought 7118.71

Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Facebook, Inc. Memo Item

Date of Public Distribution/Dissemination 08 / 01 / 2018

Mailing Address 1 Hacker Way

Amount 1.12

City Menlo Park State CA Zip Code 94025

Transaction ID : SE.5248

Purpose of Expenditure Trump - Zeldin Bear ad Category/Type 004

Date of Disbursement or Obligation 08 / 01 / 2018

Name of Federal Candidate: ZELDIN, LEE M, , Support Oppose

Office Sought: House District: 01 State: NY

Calendar Year-To-Date Per Election for Office Sought 7119.83

Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 63.21

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Facebook, Inc.
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Trump - Zeldin Bear ad
Category/Type 004
Name of Federal Candidate: ZELDIN, LEE M, ,
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 11316.13
Disbursement For: General 2018

Full Name of Payee Facebook, Inc.
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Trump - Zeldin Bear ad
Category/Type 004
Name of Federal Candidate: ZELDIN, LEE M, ,
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 14617.24
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 674.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11 / 01 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Finer, Samuel, , ,
Mailing Address: 111 Bayview Terrace
City: Port Jefferson, State: NY, Zip Code: 11777
Purpose of Expenditure: Canvassing in NY1 for Perry Gershon
Category/Type: 001
Date of Public Distribution/Dissemination: 08/19/2018
Amount: 157.50
Transaction ID: SE.5265
Date of Disbursement or Obligation: 08/24/2018

Name of Federal Candidate: GERSHON, PERRY, , ,
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought: 10283.62
Disbursement For: Primary [] General [X] Other (specify) []

Full Name of Payee: Finer, Samuel, , ,
Mailing Address: 111 Bayview Terrace
City: Port Jefferson, State: NY, Zip Code: 11777
Purpose of Expenditure: Canvassing in NY1 for Perry Gershon
Category/Type: 001
Date of Public Distribution/Dissemination: 09/02/2018
Amount: 348.75
Transaction ID: SE.5275
Date of Disbursement or Obligation: 09/05/2018

Name of Federal Candidate: GERSHON, PERRY, , ,
Support: [X] Oppose: []
Office Sought: House [X] Senate [] President []
District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought: 12347.38
Disbursement For: Primary [] General [X] Other (specify) []

(a) SUBTOTAL of Itemized Independent Expenditures 506.25
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11/01/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Finer, Samuel, , , Memo Item
Mailing Address: 111 Bayview Terrace
City: Port Jefferson, State: NY, Zip Code: 11777
Purpose of Expenditure: Canvassing in NY1 for Perry Gershon, Category/Type: 001
Date of Public Distribution/Dissemination: 09/06/2018
Amount: 195.00
Transaction ID: SE.5287
Date of Disbursement or Obligation: 09/18/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House, District: 01, State: NY
Calendar Year-To-Date Per Election for Office Sought: 24287.24
Disbursement For: General 2018

Full Name of Payee: Finer, Samuel, , , Memo Item
Mailing Address: 111 Bayview Terrace
City: Port Jefferson, State: NY, Zip Code: 11777
Purpose of Expenditure: Canvassing in NY2 for Liuba, Category/Type: 001
Date of Public Distribution/Dissemination: 09/18/2018
Amount: 255.00
Transaction ID: SE.5668
Date of Disbursement or Obligation: 09/18/2018

Name of Federal Candidate: Shirley, Liuba, , , Support
Office Sought: House, District: 02, State: NY
Calendar Year-To-Date Per Election for Office Sought: 2361.53
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 450.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11/01/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Gogarty, Kayla, , , Memo Item
Mailing Address 83 Apple Lane
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 05 / 2018
Amount 138.75
Transaction ID : SE.5255
Date of Disbursement or Obligation 08 / 07 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 8196.08
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Gogarty, Kayla, , , Memo Item
Mailing Address 83 Apple Lane
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 135.00
Transaction ID : SE.5266
Date of Disbursement or Obligation 08 / 24 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 10418.62
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 273.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Gogarty, Kayla, , , Memo Item
Mailing Address 83 Apple Lane
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 198.75
Transaction ID : SE.5276
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 12546.13
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Gogarty, Kayla, , , Memo Item
Mailing Address 83 Apple Lane
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY2 for Liuba Category/Type 001
Date of Public Distribution/Dissemination 09 / 18 / 2018
Amount 90.00
Transaction ID : SE.5669
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: Shirley, Liuba, , , Support Oppose
Office Sought: House District: 02 State: NY
Calendar Year-To-Date Per Election for Office Sought 2451.53
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 288.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11 / 01 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Internal Revenue Service
Mailing Address 1111 Constitution Avenue Northwest
City Washington State DC Zip Code 20224
Purpose of Expenditure FICA and FUTA taxes for canvassers
Category/Type 001
Date of Public Distribution/Dissemination 08/05/2018
Amount 132.74
Transaction ID: SE.5261
Date of Disbursement or Obligation 08/07/2018
Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 8926.87
Disbursement For: General 2018

Full Name of Payee Internal Revenue Service
Mailing Address 1111 Constitution Avenue Northwest
City Washington State DC Zip Code 20224
Purpose of Expenditure Canvassing in NY1 for Perry Gershon
Category/Type 001
Date of Public Distribution/Dissemination 08/19/2018
Amount 162.66
Transaction ID: SE.5272
Date of Disbursement or Obligation 08/24/2018
Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 11061.28
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 295.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11/01/2018
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Internal Revenue Service	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1111 Constitution Avenue Northwest	Amount <input type="text"/>
City Washington State DC Zip Code 20224	Transaction ID : SE.5284 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing in NY1 for Perry Gershon	Category/Type <input type="text"/>
Name of Federal Candidate: GERSHON, PERRY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Internal Revenue Service	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1111 Constitution Avenue Northwest	Amount <input type="text"/>
City Washington State DC Zip Code 20224	Transaction ID : SE.5292 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing in NY1 for Perry Gershon	Category/Type <input type="text"/>
Name of Federal Candidate: GERSHON, PERRY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Internal Revenue Service <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1111 Constitution Avenue Northwest	Amount <input type="text"/>
City State Zip Code Washington DC 20224	
Purpose of Expenditure Canvassing in NY2 for Liuba	Transaction ID : SE.5674 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Shirley, Liuba, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Disbursement Amount <input type="text"/> 3077.66	

Full Name of Payee Lawrence-Jolly, Mulique, , , <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1441 East 88th Street	Amount <input type="text"/>
City State Zip Code Brooklyn NY 11236	
Purpose of Expenditure Canvassing in NY1 for Perry Gershon	Transaction ID : SE.5277 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: GERSHON, PERRY, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶
Disbursement Amount <input type="text"/> 12658.63	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 217.38
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Lawrence-Jolly, Mulique, , ,			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1441 East 88th Street			Amount <input type="text"/> 45.00	
City Brooklyn	State NY	Zip Code 11236	Transaction ID : SE.5291	
Purpose of Expenditure Canvassing in NY1 for Perry Gershon		Category/ Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: GERSHON, PERRY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 24455.99			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Lawrence-Jolly, Mulique, , ,			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1441 East 88th Street			Amount <input type="text"/> 45.00	
City Brooklyn	State NY	Zip Code 11236	Transaction ID : SE.5670	
Purpose of Expenditure Canvassing in NY2 for Liuba		Category/ Type <input type="text"/> 001	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Shirley, Liuba, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2496.53			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 90.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Montauban, Judith, , , Memo Item
Mailing Address 3103 Kane Ave
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 71.25
Transaction ID : SE.5267
Date of Disbursement or Obligation 08 / 24 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Montauban, Judith, , , Memo Item
Mailing Address 3103 Kane Ave
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 78.75
Transaction ID : SE.5278
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 150.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Montauban, Judith, ,
Mailing Address 3103 Kane Ave
City Medford State NY Zip Code 11763
Purpose of Expenditure Canvassing in NY1 for Perry Gershon
Category/Type 001
Date of Public Distribution/Dissemination 09/06/2018
Amount 33.75
Transaction ID : SE.5288
Date of Disbursement or Obligation 09/18/2018

Name of Federal Candidate: GERSHON, PERRY, ,
Support Oppose
Office Sought: House District: 01
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 24320.99
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee New York State Department of Taxation and Finance
Mailing Address STATE PROCESSING CENTER PO BOX 61000
City Albany State NY Zip Code 12261
Purpose of Expenditure NYS payroll taxes for canvassers
Category/Type 001
Date of Public Distribution/Dissemination 08/05/2018
Amount 65.55
Transaction ID : SE.5259
Date of Disbursement or Obligation 08/07/2018

Name of Federal Candidate: GERSHON, PERRY, ,
Support Oppose
Office Sought: House District: 01
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 8794.13
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 99.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, [Electronically Filed] Date 11/01/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee New York State Department of Taxation and Finance
Mailing Address STATE PROCESSING CENTER PO BOX 61000
City Albany State NY Zip Code 12261
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08/19/2018
Amount 80.35
Transaction ID : SE.5273
Date of Disbursement or Obligation 08/24/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 11141.63
Disbursement For: General 2018

Full Name of Payee New York State Department of Taxation and Finance
Mailing Address STATE PROCESSING CENTER PO BOX 61000
City Albany State NY Zip Code 12261
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09/02/2018
Amount 101.60
Transaction ID : SE.5285
Date of Disbursement or Obligation 09/05/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 14117.24
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 181.95
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,
Signature

[Electronically Filed]

Date 11/01/2018

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item New York State Department of Taxation and Finance			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address STATE PROCESSING CENTER PO BOX 61000			Amount <input type="text"/>		
City Albany	State NY	Zip Code 12261	Transaction ID : SE.5293		
Purpose of Expenditure Canvassing in NY1 for Perry Gershon		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: GERSHON, PERRY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item New York State Department of Taxation and Finance			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address STATE PROCESSING CENTER PO BOX 61000			Amount <input type="text"/>		
City Albany	State NY	Zip Code 12261	Transaction ID : SE.5675		
Purpose of Expenditure Canvassing in NY2 for Liuba		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Shirley, Liuba, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Plofker, Noah, , ,	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 134-1 13th Ave	Amount <input type="text"/> 270.00
City Holtsville State NY Zip Code 11742	
Purpose of Expenditure Canvassing in NY1 for Perry Gershon	Transaction ID : SE.5256 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: GERSHON, PERRY, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 8466.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Plofker, Noah, , ,	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 134-1 13th Ave	Amount <input type="text"/> 33.75
City Holtsville State NY Zip Code 11742	
Purpose of Expenditure Canvassing in NY1 for Perry Gershon	Transaction ID : SE.5268 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: GERSHON, PERRY, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 10523.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 303.75
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Plofker, Noah, , ,
Mailing Address 134-1 13th Ave
City Holtsville State NY Zip Code 11742
Purpose of Expenditure Canvassing in NY1 for Perry Gershon
Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 45.00
Transaction ID : SE.5279
Date of Disbursement or Obligation 09 / 05 / 2018
Name of Federal Candidate: GERSHON, PERRY, , ,
Office Sought: House District: 01 State: NY
Disbursement For: General 2018

Full Name of Payee Poulos, Lise, , ,
Mailing Address 117 Erin Lane
City East Setauket State NY Zip Code 11733
Purpose of Expenditure Canvassing in NY1 for Perry Gershon
Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 48.75
Transaction ID : SE.5269
Date of Disbursement or Obligation 08 / 24 / 2018
Name of Federal Candidate: GERSHON, PERRY, , ,
Office Sought: House District: 01 State: NY
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 93.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,
Signature

[Electronically Filed]

Date 11 / 01 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Poulos, Lise, , , Memo Item
Mailing Address 117 Erin Lane
City East Setauket State NY Zip Code 11733
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001

Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 243.75
Transaction ID : SE.5280
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 13026.13

Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Poulos, Lise, , , Memo Item
Mailing Address 117 Erin Lane
City East Setauket State NY Zip Code 11733
Purpose of Expenditure Canvassing in NY2 for Liuba Category/Type 001

Date of Public Distribution/Dissemination 09 / 18 / 2018
Amount 112.50
Transaction ID : SE.5671
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: Shirley, Liuba, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2609.03

Office Sought: House District: 02 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 356.25
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed]
Signature

Date 11 / 01 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER
C C00637645

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Resistance Labs, LLC
Mailing Address: 902 Everett Ave
City: Oakland, State: CA, Zip Code: 94602
Purpose of Expenditure: voter outreach texting
Category/Type: 005
Date of Public Distribution/Dissemination: 10/06/2018
Amount: 9265.00
Transaction ID: SE.5751
Date of Disbursement or Obligation: 09/10/2018
Name of Federal Candidate: GERSHON, PERRY, ,
Support: [X]
Office Sought: House
District: 01, State: NY
Calendar Year-To-Date Per Election for Office Sought: 23882.24
Disbursement For: General

Full Name of Payee: Savarese, Matthew, ,
Mailing Address: 7 Glen Hollow Dr. Apt. B12
City: Holtsville, State: NY, Zip Code: 11742
Purpose of Expenditure: Canvassing in NY1 for Perry Gershon
Category/Type: 001
Date of Public Distribution/Dissemination: 08/05/2018
Amount: 262.50
Transaction ID: SE.5257
Date of Disbursement or Obligation: 08/07/2018
Name of Federal Candidate: GERSHON, PERRY, ,
Support: [X]
Office Sought: House
District: 01, State: NY
Calendar Year-To-Date Per Election for Office Sought: 8728.58
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures 9527.50
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed]
Signature Date 11/01/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Savarese, Matthew, , , Memo Item
Mailing Address 7 Glen Hollow Dr. Apt. B12
City Holtsville State NY Zip Code 11742
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 285.00
Transaction ID : SE.5270
Date of Disbursement or Obligation 08 / 24 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Savarese, Matthew, , , Memo Item
Mailing Address 7 Glen Hollow Dr. Apt. B12
City Holtsville State NY Zip Code 11742
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 135.00
Transaction ID : SE.5281
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 420.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Sinkler, Kenneth, , , Memo Item
Mailing Address 29 Shenandoah Blvd
City Port Jefferson Station State NY Zip Code 11776
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 08 / 19 / 2018
Amount 41.25
Transaction ID : SE.5271
Date of Disbursement or Obligation 08 / 24 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 10898.62
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Sinkler, Kenneth, , , Memo Item
Mailing Address 29 Shenandoah Blvd
City Port Jefferson Station State NY Zip Code 11776
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 337.50
Transaction ID : SE.5282
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 13498.63
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 378.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Sinkler, Kenneth, , , Memo Item
Mailing Address 29 Shenandoah Blvd
City Port Jefferson Station State NY Zip Code 11776
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 06 / 2018
Amount 15.00
Transaction ID : SE.5290
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Sinkler, Kenneth, , , Memo Item
Mailing Address 29 Shenandoah Blvd
City Port Jefferson Station State NY Zip Code 11776
Purpose of Expenditure Canvassing in NY2 for Liuba Category/Type 001
Date of Public Distribution/Dissemination 09 / 18 / 2018
Amount 251.25
Transaction ID : SE.5672
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: Shirley, Liuba, , , Support Oppose
Office Sought: House District: 02 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 266.25
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Snider, Terry-Linn, , , Memo Item
Mailing Address 26 Tower Hill Rd
City Shoreham State NY Zip Code 11786
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 311.25
Transaction ID : SE.5283
Date of Disbursement or Obligation 09 / 05 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Snider, Terry-Linn, , , Memo Item
Mailing Address 26 Tower Hill Rd
City Shoreham State NY Zip Code 11786
Purpose of Expenditure Canvassing in NY1 for Perry Gershon Category/Type 001
Date of Public Distribution/Dissemination 09 / 06 / 2018
Amount 75.00
Transaction ID : SE.5289
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: GERSHON, PERRY, , , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 386.25
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Snider, Terry-Linn, , ,
Mailing Address 26 Tower Hill Rd
City Shoreham State NY Zip Code 11786
Purpose of Expenditure Canvassing in NY2 for Liuba
Category/Type 001
Date of Public Distribution/Dissemination 09 / 18 / 2018
Amount 112.50
Transaction ID : SE.5673
Date of Disbursement or Obligation 09 / 18 / 2018

Name of Federal Candidate: Shirley, Liuba, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 2972.78
Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee Tri Star Graphics, Inc.
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit - to be recognized as distributed
Category/Type 006
Date of Public Distribution/Dissemination 09 / 02 / 2018
Amount 3575.31
Transaction ID : SE.5389
Date of Disbursement or Obligation 07 / 26 / 2018

Name of Federal Candidate: TRUMP, DONALD J, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 3775.30
Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3687.81
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11 / 01 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Tri Star Graphics, Inc.
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Dont Forget To Vote Postcards - to be recognized as distributed
Category/Type 006
Date of Public Distribution/Dissemination 09/02/2018
Amount 3032.19
Transaction ID : SE.5390
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: GERSHON, PERRY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Tri Star Graphics, Inc.
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit - dissmminated 8/5/18
Category/Type 006
Date of Public Distribution/Dissemination 08/05/2018
Amount 378.98
Transaction ID : SE.5392
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: TRUMP, DONALD J, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3032.19
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date

11/01/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit - disseminated 8/19/18
Category/Type 006
Date of Public Distribution/Dissemination 08/19/2018
Amount 464.08
Transaction ID: SE.5393
Date of Disbursement or Obligation 07/26/2018
Name of Federal Candidate: TRUMP, DONALD J, , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit - disseminated 9/2/18
Category/Type 006
Date of Public Distribution/Dissemination 09/02/2018
Amount 587.07
Transaction ID: SE.5394
Date of Disbursement or Obligation 07/26/2018
Name of Federal Candidate: TRUMP, DONALD J, , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date

11/01/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit Category/Type 006
Date of Public Distribution/Dissemination 09/05/2018
Amount 8.58
Transaction ID: SE.5395
Date of Disbursement or Obligation 07/26/2018
Name of Federal Candidate: TRUMP, DONALD J, , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Don't Forget To Vote Postcards - disseminated 8/5/18 Category/Type 006
Date of Public Distribution/Dissemination 08/05/2018
Amount 115.83
Transaction ID: SE.5397
Date of Disbursement or Obligation 07/26/2018
Name of Federal Candidate: GERSHON, PERRY, , Support Oppose
Office Sought: House District: 01 State: NY
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date 11/01/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Don't Forget To Vote Postcards - disseminated 8/19/18
Category/Type 006
Date of Public Distribution/Dissemination 08/19/2018
Amount 141.91
Transaction ID: SE.5398
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: General 2018

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Don't Forget To Vote Postcards - disseminated 9/2/18
Category/Type 006
Date of Public Distribution/Dissemination 09/02/2018
Amount 179.51
Transaction ID: SE.5399
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11/01/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County
FEC IDENTIFICATION NUMBER C C00637645

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Don't Forget To Vote Postcards - disseminated 9/4/18
Category/Type 006
Date of Public Distribution/Dissemination 09/04/2018
Amount 60.64
Transaction ID : SE.5400
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: GERSHON, PERRY, , , Support
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: General 2018

Full Name of Payee Tri Star Graphics, Inc. Memo Item
Mailing Address P.O. Box 178
City Garden City State NY Zip Code 11530
Purpose of Expenditure TASC - Anti Trump Lit - disseminated 9/6/18
Category/Type 006
Date of Public Distribution/Dissemination 09/06/2018
Amount 5.72
Transaction ID : SE.5402
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: TRUMP, DONALD J, , , Oppose
Office Sought: House District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought 6807.49
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, ,

[Electronically Filed]

Date 11/01/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Taking Action For Suffolk County	FEC IDENTIFICATION NUMBER ▼ C C00637645
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Tri Star Graphics, Inc.		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 178		Amount <input type="text"/>	
City Garden City	State NY	Zip Code 11530	Transaction ID : SE.5391
Purpose of Expenditure TASC - Anti Trump Lit - Liuba - to be recognized as distributed		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: TRUMP, DONALD J, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ervin, Robert, Francis, , [Electronically Filed] Date / /

Signature