

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
Elise for Congress

ADDRESS (number and street) PO Box 500  
 Check if different than previously reported. (ACC) Glens Falls NY 12801

2. **FEC IDENTIFICATION NUMBER** C C00547893 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
NY 21

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
06 / 09 / 2016 through 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Cabell Hobbs  
Signature of Treasurer Cabell Hobbs *[Electronically Filed]* Date M M / D D / Y Y Y Y  
07 / 15 / 2016

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Elise for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	260001.50	2019296.49
(b) Total Contribution Refunds (from Line 20(d)) .....	2300.00	9118.30
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	257701.50	2010178.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	52643.18	903326.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.50	17063.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	52642.68	886263.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1455818.87	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Elise for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	138938.00	842323.50
(ii) Unitemized.....	18133.50	108368.04
(iii) TOTAL of contributions from individuals ▶	157071.50	950691.54
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	102930.00	1068604.95
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	260001.50	2019296.49
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	13799.70	186782.97
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.50	17063.55
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	273801.70	2223143.01

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52643.18	903326.68
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	3000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	35000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2300.00	9118.30
(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 20(a), (b), and (c)).....	2300.00	9118.30
21. OTHER DISBURSEMENTS .....	0.00	2500.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	54943.18	952944.98

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1236960.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	273801.70
25. SUBTOTAL (add Line 23 and Line 24).....	1510762.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	54943.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1455818.87

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEONARDO ALCIVAR**

Mailing Address 209 FRANKLIN STREET

City State Zip Code  
ALEXANDRIA VA 22314-3842

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

Name of Employer Occupation  
ELISE FOR CONGRESS COMMUNICATIONS DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2016

**Transaction ID : SA11A.8058**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3921 TERRY PLACE

City State Zip Code  
ALEXANDRIA VA 22304-1737

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

Name of Employer Occupation  
PRIME POLICY GROUP DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2016

**Transaction ID : SA11A.8053**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DYLAN E. KORPITA**

Mailing Address P.O. BOX 302

City State Zip Code  
SOTH DEERFIELD MA 01373-0302

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

Name of Employer Occupation  
OKMA CONSULTANT CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 10 / 2016

**Transaction ID : SA11A.8250**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**FRANCIS B. BROGAN III**

Mailing Address 2510 VIRGINIA AVENUE N.W.

City: WASHINGTON State: DC Zip Code: 20037-1902

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

Name of Employer: SELF Occupation: ATTORNEY AND BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 06 / 13 / 2016

**Transaction ID : SA11A.8344**

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

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

Mailing Address 3055 WHITEHAVEN STREET NW

City: WASHINGTON State: DC Zip Code: 20008-3613

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

Name of Employer: BERMAN ENTERPRISES Occupation: GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 06 / 13 / 2016

**Transaction ID : SA11A.8343**

Amount of Each Receipt this Period: 2700.00

Memo Item CONTRIBUTION  
SEE REDESIGNATION

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

Mailing Address 3055 WHITEHAVEN STREET NW

City: WASHINGTON State: DC Zip Code: 20008-3613

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

Name of Employer: BERMAN ENTERPRISES Occupation: GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 06 / 27 / 2016

**Transaction ID : SA11A.8522**

Amount of Each Receipt this Period: 2700.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 7 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 3055 WHITEHAVEN STREET NW

City WASHINGTON State DC Zip Code 20008-3613

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

Name of Employer **BERMAN ENTERPRISES** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8522B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

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

Mailing Address 3055 WHITEHAVEN STREET NW

City WASHINGTON State DC Zip Code 20008-3613

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

Name of Employer **BERMAN ENTERPRISES** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 13 / 2016**

**Transaction ID : SA11A.8345**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address 10 SHERIDAN SQ APT 5B

City NEW YORK State NY Zip Code 10014-6861

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

Name of Employer **GOOGLE** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 13 / 2016**

**Transaction ID : SA11A.8346**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**2950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**THADDEUS M. BINGEL**

Mailing Address 1919 M STREET NW, SUITE 200

City WASHINGTON State DC Zip Code 20036-3545

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

Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **271.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8355**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3201 44TH STREET NW

City WASHINGTON State DC Zip Code 20016-3526

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8354**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1602 BELMONT ST NW

City WASHINGTON State DC Zip Code 20009-

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

Name of Employer SWISS RE Occupation FINANCE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8358**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

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

**750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 440 12TH STREET NE

City WASHINGTON State DC Zip Code 20002-6382

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

Name of Employer GLOVER PARK GROUP Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8349**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL R. PASKO**

Mailing Address 132 18TH ST., SE

City WASHINGTON State DC Zip Code 20003-1611

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

Name of Employer MC DONALD HOPKINS GOVERNMENT STRA Occupation LEGISLATIVE MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8353**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address 3718 CALVERT STREET

City WASHINGTON State DC Zip Code 20007-1806

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

Name of Employer SAP AMERICA, INC. Occupation CHIEF OF STAFF

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8351**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

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

**1100.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STUART W. SICILIANO**

Mailing Address 5205 ABINGDON ROAD

City State Zip Code  
BETHESDA MD 20816-1834

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

Name of Employer Occupation  
HAMILTON PLACE STRATEGIES PARTNER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8352**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1172 PARK AVENUE

City State Zip Code  
NEW YORK NY 10128-1213

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

Name of Employer Occupation  
ZFI CAPITAL FINANCE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2016

**Transaction ID : SA11A.8356**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SALVATORE A. FRATTO**

Mailing Address 6623 32ND STREET NW

City State Zip Code  
WASHINGTON DC 20015-2309

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

Name of Employer Occupation  
HAMILTON PLACE STRATEGIES, LLC PARTNER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2016

**Transaction ID : SA11A.8360**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

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

5900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 6623 32ND STREET NW

City WASHINGTON State DC Zip Code 20015-2309

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

Name of Employer HAMILTON PLACE STRATEGIES, LLC Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8521**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**SALVATORE A. FRATTO**

Mailing Address 6623 32ND STREET NW

City WASHINGTON State DC Zip Code 20015-2309

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

Name of Employer HAMILTON PLACE STRATEGIES, LLC Occupation PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8521B**

Amount of Each Receipt this Period  
 -2700.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**PETER W. JASINSKI**

Mailing Address 114 HUDSON POINTE BLVD

City QUEENSBURY State NY Zip Code 12804-6415

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **480.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2016

**Transaction ID : SA11A.8359**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

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

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

250.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 120

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAN J. KENIRY**

Mailing Address 5553 LITTLE FALLS RD

City ARLINGTON State VA Zip Code 22207-1525

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

Name of Employer UNITEDHEALTH GROUP Occupation VP, GOVERNMENT AFFAIRS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2016

**Transaction ID : SA11A.8363**

Amount of Each Receipt this Period  
 500.00

Memo Item  
 CONTRIBUTION

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

Mailing Address 221 VINCENNES CIRCLE

City NORTH BAY State WI Zip Code 53401-

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

Name of Employer SC JOHNSON Occupation GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8374**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VICTOR MACRI JR.**

Mailing Address 73 MOHICAN STREET

City GLENS FALLS State NY Zip Code 12801-4429

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

Name of Employer VMJR COMPANIES LLC Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8375**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 13 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1908NYS ROUTE 73,P.O. BOX 54  
P.O. BOX 54 1908 NYS RT 73

City KEENE VALLEY State NY Zip Code 12943-0054

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8366**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1908NYS ROUTE 73,P.O. BOX 54  
P.O. BOX 54 1908 NYS RT 73

City KEENE VALLEY State NY Zip Code 12943-0054

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8369**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. PARSONS**

Mailing Address 104 RICHARD RD

City SYRACUSE State NY Zip Code 13215-1530

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8377**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 5001 26TH STREET N

City ARLINGTON State VA Zip Code 22207-2634

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

**Transaction ID : SA11A.8376**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER DELLA BELLA**

Mailing Address 16 FOX HOLLOW LANE

City QUEENSBURY State NY Zip Code 12804-1139

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

Name of Employer DELLA AUTO GROUP Occupation CAR DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8381**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**I STEVEN GOLDSTEIN**

Mailing Address 300 EAST 56 STREET

City NEW YORK State NY Zip Code 10022-4136

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

Name of Employer BP GLOBAL SOLUTIONS Occupation SVP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8386**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
CONTRIBUTION

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 103 EAST 75TH STREET

City NEW YORK State NY Zip Code 10021-2805

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

Name of Employer PJT PARTNERS Occupation FINANCE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8380**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1609 D STREET SE

City WASHINGTON State DC Zip Code 20003-2441

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

Name of Employer COMMAND CONSULTING GROUP Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
575.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8387**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DOUG K. IRISH**

Mailing Address 8 BUENA VISTA AVE

City QUEENSBURY State NY Zip Code 12804-1229

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

Name of Employer ACCURACY DRIVEN, INC. Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8382**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 16 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 111 LAWRENCE ST APT 5M

City State Zip Code  
BROOKLYN NY 11201-3861

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

Name of Employer Occupation  
VINSON & ELKINS ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8385**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 70 EAST 96TH STREET

City State Zip Code  
NEW YORK NY 10128-0745

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : SA11A.8383**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHARLES R. BLACK**

Mailing Address 601 N FAIRFAX STREET 402

City State Zip Code  
ALEXANDRIA VA 22314-2079

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

Name of Employer Occupation  
PRIME POLICY GROUP CHAIRMAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8413**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1600.00



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

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

FOR LINE NUMBER: PAGE 17 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID J. COLLINS**

Mailing Address 500 BRAIM RD

City GREENFIELD CENTER State NY Zip Code 12833-1736

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

Name of Employer D.A. COLLINS CONSTRUCTION Occupation CONSTRUCTION

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8388**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEPHANIE D. COLLINS**

Mailing Address 500 BRAIM RD

City GREENFIELD CENTER State NY Zip Code 12833-1736

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8389**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DOUG K. IRISH**

Mailing Address 8 BUENA VISTA AVE

City QUEENSBURY State NY Zip Code 12804-1229

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

Name of Employer ACCURACY DRIVEN, INC. Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8425**

Amount of Each Receipt this Period  
40.00

Memo Item  
CONTRIBUTION

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

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

5440.00

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

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

FOR LINE NUMBER: PAGE 18 OF 120  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD D. KRATOVIL**

Mailing Address 3300 N VERMONT ST

City ARLINGTON State VA Zip Code 22207-4469

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8396**

Amount of Each Receipt this Period  
**1200.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**SHARON L. LANTZ**

Mailing Address 13 ANYHOW LANE

City GANSEVOORT State NY Zip Code 12831-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8398**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027-0986

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

Name of Employer LARRISON GROUP Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8420**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

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

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

**4050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD E. MEADE**

Mailing Address **700 BERRY STREET**

City **FALLS CHURCH** State **VA** Zip Code **22042-2402**

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

Name of Employer **CREDIT UNION NATIONAL ASSOCIATION** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2016**

**Transaction ID : SA11A.8411**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **111 LAWRENCE ST APT 5M**

City **BROOKLYN** State **NY** Zip Code **11201-3861**

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

Name of Employer **VINSON & ELKINS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2016**

**Transaction ID : SA11A.8421**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**JASMINE WEBB VAKERICS**

Mailing Address **4221 36TH STREET S**

City **ARLINGTON** State **VA** Zip Code **22206-1807**

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

Name of Employer **OVATION INC** Occupation **DIRECTOR OF NATIONAL ACCOUNTS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2016**

**Transaction ID : SA11A.8412**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DMN MANAGEMENT SERVICES LLC**

Mailing Address 26 NORTH BROADWAY

City State Zip Code  
SCHENECTADY NY 12305-1932

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8393**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW

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

Mailing Address 26 NORTH BROADWAY

City State Zip Code  
SCHENECTADY NY 12305-1932

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

Name of Employer Occupation  
DMN MANAGEMENT SERVICES LLC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8416**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

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

Mailing Address 26 NORTH BROADWAY

City State Zip Code  
SCHENECTADY NY 12305-1932

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

Name of Employer Occupation  
DMN MANAGEMENT SERVICES LLC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11A.8417**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARK L. BEHAN**

Mailing Address 86 GLEN STREET

City State Zip Code  
GLENS FALLS NY 12801-4433

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

Name of Employer Occupation  
BEHAN COMMUNICATIONS, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11A.8437**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MARK L. BEHAN**

Mailing Address 86 GLEN STREET

City State Zip Code  
GLENS FALLS NY 12801-4433

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

Name of Employer Occupation  
BEHAN COMMUNICATIONS, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8525**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. MARK L. BEHAN**

Mailing Address 86 GLEN STREET

City State Zip Code  
GLENS FALLS NY 12801-4433

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

Name of Employer Occupation  
BEHAN COMMUNICATIONS, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8525B**

Amount of Each Receipt this Period  
-1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 10134 WALLER DRIVE

City State Zip Code  
DALLAS TX 75229-6611

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

Name of Employer Occupation  
DEASON CAPITAL SERVICES INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11A.8469**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

Mailing Address 10134 WALLER DRIVE

City State Zip Code  
DALLAS TX 75229-6611

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

Name of Employer Occupation  
DEASON CAPITAL SERVICES INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8523**

Amount of Each Receipt this Period  
-2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

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

Mailing Address 10134 WALLER DRIVE

City State Zip Code  
DALLAS TX 75229-6611

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

Name of Employer Occupation  
DEASON CAPITAL SERVICES INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8524**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN ADAM FRANCIS**

Mailing Address 4810 33RD N

City ARLINGTON State VA Zip Code 22207-2802

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

Name of Employer ERNST & YOUNG LLP Occupation PRINCIPAL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8463**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID W. HOBBS**

Mailing Address 300 NEW JERSEY AVE NW

City WASHINGTON State DC Zip Code 20001-2030

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

Name of Employer THE HOBBS GROUP Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8451**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**JOEL D. KAPLAN**

Mailing Address 3809 LELAND STREET

City CHEVY CHASE State MD Zip Code 20815-4901

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

Name of Employer FACEBOOK Occupation VP US PUBLIC POLICY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8470**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

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

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

**4200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 7011 MEADOW LANE

City State Zip Code  
CHEVY CHASE MD 20815-5015

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

Name of Employer Occupation  
CHEVRON GOVERNMENT AFFAIRS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11A.8435**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROSS M. KYLE**

Mailing Address 237 WARREN STREET NE

City State Zip Code  
WASHINGTON DC 20002-6429

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

Name of Employer Occupation  
VAN SCOYOC ASSOCIATES CHIEF OF STAFF

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11A.8457**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**EMILY K. LAMPKIN**

Mailing Address 1640 DAVIDSON ROAD

City State Zip Code  
MCLEAN VA 22101-4306

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

Name of Employer Occupation  
THE LAMPKIN GROUP PUBLIC AFFAIRS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11A.8439**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EMILY K. LAMPKIN**

Mailing Address 1640 DAVIDSON ROAD

City MCLEAN	State VA	Zip Code 22101-4306
----------------	-------------	------------------------

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

Name of Employer THE LAMPKIN GROUP	Occupation PUBLIC AFFAIRS
---------------------------------------	------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8440**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 126 SOUTH WINDSOR AVENUE

City BRIGHTWATERS	State NY	Zip Code 11718-1506
----------------------	-------------	------------------------

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

Name of Employer JONES WALKER LLP	Occupation ATTORNEY
--------------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8436**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT H. MARSH**

Mailing Address 308 WEST STREET NW

City VIENNA	State VA	Zip Code 22180-4151
----------------	-------------	------------------------

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

Name of Employer OB-C GROUP	Occupation PRINCIPAL
--------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8466**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FREDERICK G. NATALE**

Mailing Address 341 COUNTY ROUTE 28

City GRANVILLE State NY Zip Code 12832-4411

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

Name of Employer NBT BANK Occupation PORTFOLIO MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8438**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1000 NEW JERSEY AVE SE APT 911

City WASHINGTON State DC Zip Code 20003-3370

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

Name of Employer PLAY-ACTION STRATEGIES Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8458**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KAREN M. NUSSLE**

Mailing Address 8643 MT VERNON HWY

City ALEXANDRIA State VA Zip Code 22309-2030

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

Name of Employer RIPPLE COMMUNICATIONS Occupation PRESIDENT/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8441**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 27 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GARDNER G. PECKHAM**

Mailing Address 4418 RIDGE STREET

City State Zip Code  
CHEVY CHASE MD 20815-5226

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

Name of Employer Occupation  
PRIME POLICY GROUP MANAGING DIRECTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8459**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ALMEDA C. RILEY**

Mailing Address 156 LAWRENCE STREET 203A

City State Zip Code  
SARATOGA SPRINGS NY 12866-1350

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8450**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1110 VERMONT AVE NW STE 1000

City State Zip Code  
WASHINGTON DC 20005-3551

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

Name of Employer Occupation  
PRIME POLICY GROUP MANAGING DIRECTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8462**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 2315 JEFFERSON DAVIS HWY.

City ALEXANDRIA State VA Zip Code 22301-2168

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8443**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KEITH H. SMITH**

Mailing Address 1601 JETTYS REACH

City WILMINGTON State NC Zip Code 28409-4514

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

Name of Employer PRIME POLICY GROUP Occupation MANAGING DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8460**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3808 N. WOODSTOCK STREET

City ARLINGTON State VA Zip Code 22207-4346

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

Name of Employer TODD STRATEGY Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8467**

Amount of Each Receipt this Period  
 500.00

Memo Item  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PAMELA J. TURNER**

Mailing Address 4831 26TH STREET N

City ARLINGTON State VA Zip Code 22207-2632

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

Name of Employer PRIME POLICY GROUP Occupation MANAGING DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11A.8461**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 3210 MACOMB STREET, NW

City WASHINGTON State DC Zip Code 20008-3326

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

Name of Employer JONES DAY Occupation LAWYER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : SA11A.8471**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4800 NETHERCOTT LANE

City WILSON State WY Zip Code 83014-

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

Name of Employer THE DAILY CALLER Occupation CO-FOUNDER AND PUBLISHER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : SA11A.8473**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1636 MADDUX LANE

City State Zip Code  
MCLEAN VA 22101-3229

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

Name of Employer Occupation  
STANTON PARK GROUP PARTNER, GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : SA11A.8472**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2639 N ROOSEVELT STREET

City State Zip Code  
ARLINGTON VA 22207-1011

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

Name of Employer Occupation  
ERNST & YOUNG CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : SA11A.8475**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BARRY S. VOLPERT**

Mailing Address 667 MADISON AVENUE

City State Zip Code  
NEW YORK NY 10065-8029

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

Name of Employer Occupation  
CRESTVIEW FINANCE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : SA11A.8474**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 31 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH M. ALLEN III**

Mailing Address **5207 FALMOUTH ROAD**

City **BETHESDA** State **MD** Zip Code **20816-2914**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8489**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAURA BAXTER-SIMMONS**

Mailing Address **ONE FERRY BUILDING SUITE 375**

City **SAN FRANCISCO** State **CA** Zip Code **94111-4202**

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

Name of Employer **MERITAGE GROUP LP** Occupation **INVESTMENT MANAGER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8494**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMEE V. BURCK**

Mailing Address **104 E. MELROSE STREET**

City **CHEVY CHASE** State **MD** Zip Code **20815-3304**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8488**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

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

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

**6400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 104 E MELROSE ST

City State Zip Code  
CHEVY CHASE MD 20815-3304

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

Name of Employer Occupation  
QUINN, EMANUEL, URQUHART & SULLIVAN ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11A.8478**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 1301

City State Zip Code  
GREAT FALLS VA 22066-8301

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

Name of Employer Occupation  
DALY CONSULTING GROUP OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11A.8480**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE B. DUKE**

Mailing Address 580 EAST MAIN STREET

City State Zip Code  
BRADFORD PA 16701-1838

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

Name of Employer Occupation  
ZIPPO MANUFACTURING CO. CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11A.8492**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

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

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

8100.00



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

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

FOR LINE NUMBER: PAGE 33 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **17 LOZIER PLACE**

City **PLATTSBURGH** State **NY** Zip Code **12901-1618**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8499**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **118 EGGLESTON ST**

City **CORINTH** State **NY** Zip Code **12822-1414**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8502**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN K. NEELY**

Mailing Address **7715 CURTIS STREET**

City **CHEVY CHASE** State **MD** Zip Code **20815-4913**

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

Name of Employer **AMERICAN BEVERAGE ASSOC** Occupation **TRADE ASSOCIATION EXEC**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 24 / 2016**

**Transaction ID : SA11A.8481**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

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

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 34 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RUSSELL J. SCHRIEFER**

Mailing Address 2929 GREENVALE ROAD

City State Zip Code  
CHEVY CHASE MD 20815-3126

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

Name of Employer Occupation  
SP&M CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11A.8477**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RILEY SWINEHART**

Mailing Address 6210 NELWAY DRIVE

City State Zip Code  
MCLEAN VA 22101-3137

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

Name of Employer Occupation  
ADVA MED VP GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11A.8484**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 317 MANSION DRIVE

City State Zip Code  
ALEXANDRIA VA 22302-2904

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

Name of Employer Occupation  
WILMERHALE LAWYER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2016

**Transaction ID : SA11A.8496**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 109 QUINCY ST

City State Zip Code  
CHEVY CHASE MD 20815-3320

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

Name of Employer Occupation  
THE CARLYLE GROUP INVESTMENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2016

**Transaction ID : SA11A.8497**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAURA COX KAPLAN**

Mailing Address 3809 LELAND STREET

City State Zip Code  
CHEVY CHASE MD 20815-4901

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

Name of Employer Occupation  
PWC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2016

**Transaction ID : SA11A.8503**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

**C.** Full Name (Last, First, Middle Initial)  
**LAURA COX KAPLAN**

Mailing Address 3809 LELAND STREET

City State Zip Code  
CHEVY CHASE MD 20815-4901

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

Name of Employer Occupation  
PWC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8730**

Amount of Each Receipt this Period  
-1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LAURA COX KAPLAN**

Mailing Address 3809 LELAND STREET

City State Zip Code  
CHEVY CHASE MD 20815-4901

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

Name of Employer Occupation  
PWC PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8731**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

Mailing Address 36 LOWER BRERETON ROAD

City State Zip Code  
DIAMOND POINT NY 12824-

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

Name of Employer Occupation  
NEMER MOTOR GROUP AUTOMOBILE DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2016

**Transaction ID : SA11A.8505**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LISA M. ROSS**

Mailing Address PSC 813 BOX 910

City State Zip Code  
FPO AE 09620-9998

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

Name of Employer Occupation  
U.S. DEPT OF STATE PASSPORT SPECIALIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
330.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2016

**Transaction ID : SA11A.8513**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address P.O. BOX 611

City NORTHVILLE State NY Zip Code 12134-0611

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

Name of Employer TOWN OF NORTHAMPTON Occupation SUPERVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2016

**Transaction ID : SA11A.8517**

Amount of Each Receipt this Period  
 100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 716 BRAND HOLLOW RD.

City PERU State NY Zip Code 12972-5102

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

Name of Employer SELF Occupation CORP PRES

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8520**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. GRACE E. CAMPBELL**

Mailing Address 1251 STATE ROUTE 313

City CAMBRIDGE State NY Zip Code 12816-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8568**

Amount of Each Receipt this Period  
 500.00

Memo Item  
CONTRIBUTION

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1735 FAIRVIEW AVE

City State Zip Code  
MCLEAN VA 22101-4709

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

Name of Employer Occupation  
KOUNToupES DENHAM CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8547**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES W. GRINTER III**

Mailing Address 2208 REGENCY PARK APTS N.

City State Zip Code  
QUEENSBURY NY 12804-1458

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8557**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN J. HADLEY**

Mailing Address 2246 CATHEDRAL AVENUE NW

City State Zip Code  
WASHINGTON DC 20008-1504

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2016

**Transaction ID : SA11A.8550**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM V. HASTINGS III**

Mailing Address 1296 STONY CREEK ROAD

City HADLEY State NY Zip Code 12835-2318

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **351.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8558**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM B. HOTALING**

Mailing Address 125 QUASSAICK AVE

City NEW WINDSOR State NY Zip Code 12553-6635

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8670**

Amount of Each Receipt this Period  
 500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4514 COLE AVE

City DALLAS State TX Zip Code 75205-5412

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

Name of Employer SELF Occupation INTERIOR DESIGNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8529**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **220 STONE CHURCH ROAD**

City **BALLSTON SPA** State **NY** Zip Code **12020-4604**

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

Name of Employer **SKIDMORE COLLEGE** Occupation **CARD OFFICE COORDINATOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **396.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8675**

Amount of Each Receipt this Period  
**21.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BERNHARD P. MOLL DREM**

Mailing Address **320 HIGHLAND AVE**

City **SYRACUSE** State **NY** Zip Code **13203-1608**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8571**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **FUTURE RESOURCES ASSOCIATES, INC.**

City **BERKELEY** State **CA** Zip Code **94704-**

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

Name of Employer **FUTURE RESOURCES ASSOC. INC.** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8674**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**521.00**



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

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

FOR LINE NUMBER: PAGE 41 OF 120  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. WILLIAM V. PEREZ II**

Mailing Address 151 CAROLINE ST

City State Zip Code  
SARATOGA SPRINGS NY 12866-3410

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 27 2016

**Transaction ID : SA11A.8654**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CARL H. PFORZHEIMER III**

Mailing Address 16 TOMPKINS RD

City State Zip Code  
SCARSDALE NY 10583-

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

Name of Employer Occupation  
CARL H. PFORZHEIMER & CO. MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 27 2016

**Transaction ID : SA11A.8587**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT L. SMITH III**

Mailing Address 116 HORSESHOE RD

City State Zip Code  
MILL NECK NY 11765-1004

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 27 2016

**Transaction ID : SA11A.8588**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDMUND SPOLETI**

Mailing Address 1211 VIEWS WAY

City POMONA State NY Zip Code 10970-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8591**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT P. TORRANCE**

Mailing Address 5177 CASCADE RD

City LAKE PLACID State NY Zip Code 12946-4123

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

Name of Employer TORRANCE CONSTRUCTION, INC. Occupation GENERAL CONTRACTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8580**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ED TUCKER**

Mailing Address 157 SHERMAN LAKE RD

City WARRENSBURG State NY Zip Code 12885-5244

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2016

**Transaction ID : SA11A.8543**

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 43 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL Q. VAN WAGENEN**

Mailing Address **21D HOLLANDALE LANE**

City **CLIFTON PARK** State **NY** Zip Code **12065-5215**

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

Name of Employer **DMNA** Occupation **PROJECT MANAGER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8527**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD D. WOOLLEY**

Mailing Address **P.O. BOX 265**

City **INDIAN LAKE** State **NY** Zip Code **12842-0265**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2016**

**Transaction ID : SA11A.8562**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN D. ACRES**

Mailing Address **194 BRANDY BROOK RD.**

City **MADRID** State **NY** Zip Code **13660-3123**

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

Name of Employer **SELF** Occupation **DAIRY PRODUCER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8925**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

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

**800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SUSAN M. ASPEY**

Mailing Address 2301 N STREET NW UNIT 406

City WASHINGTON State DC Zip Code 20037-1135

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

Name of Employer CENGAGE LEARNING Occupation SVP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8951**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address 3050 UNIVERSITY TERRACE NW

City WASHINGTON State DC Zip Code 20016-3463

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

Name of Employer ROCK CREEK GLOBAL ADVISORS Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8727**

Amount of Each Receipt this Period  
**1700.00**

Memo Item  
**CONTRIBUTION**  
**SEE REDESIGNATION**

**C.** Full Name (Last, First, Middle Initial)  
**JOSHUA B. BOLTEN**

Mailing Address 3050 UNIVERSITY TERRACE NW

City WASHINGTON State DC Zip Code 20016-3463

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

Name of Employer ROCK CREEK GLOBAL ADVISORS Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8728**

Amount of Each Receipt this Period  
**-1000.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

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

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

**1950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOSHUA B. BOLTEN**

Mailing Address 3050 UNIVERSITY TERRACE NW

City WASHINGTON State DC Zip Code 20016-3463

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

Name of Employer ROCK CREEK GLOBAL ADVISORS Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8729**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**JASON J. CENTOLELLA**

Mailing Address 100 MADISON STREET STE 1905

City SYRACUSE State NY Zip Code 13202-2703

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

Name of Employer CENTOLELLA LYNN D'ELIA & TEMES Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8973**

Amount of Each Receipt this Period  
-300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**JASON J. CENTOLELLA**

Mailing Address 100 MADISON STREET STE 1905

City SYRACUSE State NY Zip Code 13202-2703

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

Name of Employer CENTOLELLA LYNN D'ELIA & TEMES Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8974**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1547 EVERS DR

City State Zip Code  
MCLEAN VA 22101-5006

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

Name of Employer Occupation  
XENOPHON STRATEGIES PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8907**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7500 OLD GEORGETOWN ROAD

City State Zip Code  
BETHESDA MD 20814-6133

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8962**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN B. CLARK**

Mailing Address 9273 LERWICK DRIVE

City State Zip Code  
DUBLIN OH 43017-9492

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

Name of Employer Occupation  
CGCN GROUP PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8958**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

3450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 19 HEARTHSTONE DR

City State Zip Code  
WILTON NY 12831-2502

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

Name of Employer Occupation  
BEHAN COMMUNICATIONS COO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8686**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES E. COLE**

Mailing Address 117 JOSEPHINE ST

City State Zip Code  
NORTH SYRACUSE NY 13212-

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

Name of Employer Occupation  
EAGLE INSURANCE INSURANCE AGENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8896**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAY N. CRANFORD III**

Mailing Address 4136 N RICHMOND STREET

City State Zip Code  
ARLINGTON VA 22207-4816

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8959**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 48 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LEONARD J. DARIANO**

Mailing Address 4092 LAKE SHORE DR

City State Zip Code  
DIAMOND POINT NY 12824-1702

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

Name of Employer Occupation  
METRO FORD SALES AUTO DEALER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8922**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN C. DE MILIA**

Mailing Address 168 BEEKMAN AVE

City State Zip Code  
SLEEPY HOLLOW NY 10591-2444

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8779**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4715 STATE HWY 30

City State Zip Code  
AMSTERDAM NY 12010-7431

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

Name of Employer Occupation  
POWER PALLET PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8945**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

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

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

900.00



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

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

FOR LINE NUMBER: PAGE 49 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **2 CROWN POINT**

City **BALLSTON LAKE** State **NY** Zip Code **12019-1500**

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

Name of Employer **NYS WORKERS COMP BOARD** Occupation **MANAGER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1906.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8732**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J. DONOVAN**

Mailing Address **268 BROADWAY APT 301**

City **SARATOGA SPRINGS** State **NY** Zip Code **12866-4257**

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

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8876**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MICHAEL J. FALCONE**

Mailing Address **333 WEST WASHINGTON ST SUITE 600**

City **SYRACUSE** State **NY** Zip Code **13202-9203**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8691**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **74 AMHERST STREET**

City **LAKE GEORGE** State **NY** Zip Code **12845-1201**

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

Name of Employer **LAKE GEORGE MUSEUM** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8926**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRED F. FIELDING**

Mailing Address **1602 MADDUX LN**

City **MCLEAN** State **VA** Zip Code **22101-3200**

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

Name of Employer **MORGAN LEWIS** Occupation **LAWYER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8758**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**CATHERINE M. FITZGERALD**

Mailing Address **87 COOLIDGE AVE**

City **QUEENSBURY** State **NY** Zip Code **12804-2507**

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

Name of Employer **NAVIENT** Occupation **SR. MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8941**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**2250.00**

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

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

FOR LINE NUMBER: PAGE 51 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MASON R. FORRENCE**

Mailing Address 2740 RT. 22

City PERU State NY Zip Code 12972-

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

Name of Employer FORRENCE ORCHARDS, INC. Occupation PRESIDENT/POMOLOGIST

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8784**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PETER P. FORRENCE**

Mailing Address 3531 STATE ROUTE 9

City PERU State NY Zip Code 12972-5045

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

Name of Employer FORRENCE ORCHARDS Occupation VP

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8844**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SETH M. FORRENCE**

Mailing Address 112 RIVER ROAD

City PERU State NY Zip Code 12972-4641

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

Name of Employer FORRENCE ORCHARDS Occupation MANAGEMENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8848**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 52 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**VIRGIL E. FORRENCE**

Mailing Address **2725 STATE ROUTE 22**

City **PERU** State **NY** Zip Code **12972-**

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

Name of Employer **FORRENCE ORCHARDS** Occupation **OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8847**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **1101 K STREET, NW  
SUITE 650**

City **WASHINGTON** State **DC** Zip Code **20005-4048**

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

Name of Employer **CLARK, GEDULDIG, CRANFORD** Occupation **PARTNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8920**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**PATRICK J. GLAVEY**

Mailing Address **36 SHIRE OAKS DRIVE**

City **PITTSFORD** State **NY** Zip Code **14534-1549**

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

Name of Employer **MVP HEALTHCARE** Occupation **EVP, MEDICARE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8722**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**1500.00**

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

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

FOR LINE NUMBER: PAGE 53 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1217 29TH ST NW

City State Zip Code  
WASHINGTON DC 20007-3332

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

Name of Employer Occupation  
GUGGENHEIM PARTNERS LLC MANAGING DIRECTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8908**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7071 HORTON RD

City State Zip Code  
HAMILTON NY 13346-2323

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

Name of Employer Occupation  
JOHNMA. GOLDEN ASSOCIATES,INC INVESTMENTS

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8696**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. EILEEN MARY GRATZER**

Mailing Address 237 SAGAMORE HILLS DRIVE

City State Zip Code  
PORT JEFFERSON STA NY 11776-

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8766**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 54 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 7101 HENERSON ROAD

City State Zip Code  
JAMESVILLE NY 13078-9526

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

Name of Employer Occupation  
GROSSMAN ST. AMOUR CPA'S PLLC CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8944**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD S. HERLIHY**

Mailing Address 72 WALNUT ST

City State Zip Code  
GLENS FALLS NY 12801-3230

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8809**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. ROBERT HUGHES**

Mailing Address 125 MANNIS RD

City State Zip Code  
QUEENSBURY NY 12804-1365

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

Name of Employer Occupation  
SELF PHYSICIAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8677**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 55 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PETER W. JASINSKI**

Mailing Address 114 HUDSON POINTE BLVD

City State Zip Code  
QUEENSBURY NY 12804-6415

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
480.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8909**

Amount of Each Receipt this Period  
80.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. REUBEN JEFFERY III**

Mailing Address 620 PARK AVE.

City State Zip Code  
NEW YORK NY 10065-6591

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

Name of Employer Occupation  
ROCKEFELLER & CO. PRESIDENT & C.E.O.

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8767**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES F. JUDKINS**

Mailing Address 79 ALGONQUIN PK.

City State Zip Code  
PLATTSBURGH NY 12901-1101

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8808**

Amount of Each Receipt this Period  
125.00

Memo Item  
CONTRIBUTION

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

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

1205.00

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

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

FOR LINE NUMBER: PAGE 56 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 30 OAKWOOD DRIVE

City State Zip Code  
QUEENSBURY NY 12804-1328

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

Name of Employer Occupation  
ADIRONDACK RADIOLOGY RADIOLOGIST

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8914**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES M. KING**

Mailing Address 507 RIDGEWAY BLVD

City State Zip Code  
DELAND FL 32724-8814

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8782**

Amount of Each Receipt this Period  
150.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SETH A. KLARMAN**

Mailing Address 329 HEATH STREET

City State Zip Code  
CHESTNUT HILL MA 02467-2820

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

Name of Employer Occupation  
BAUPOST GROUP FOUNDER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8923**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION  
SEE REDESIGNATION

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

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

5800.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 329 HEATH STREET

City CHESTNUT HILL State MA Zip Code 02467-2820

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

Name of Employer BAUPOST GROUP Occupation FOUNDER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8965**

Amount of Each Receipt this Period  
 -2700.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**SETH A. KLARMAN**

Mailing Address 329 HEATH STREET

City CHESTNUT HILL State MA Zip Code 02467-2820

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

Name of Employer BAUPOST GROUP Occupation FOUNDER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8966**

Amount of Each Receipt this Period  
 2700.00

Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN LINDSEY**

Mailing Address 136 E. 79TH ST

City NEW YORK State NY Zip Code 10075-

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

Name of Employer TIP COMPANY Occupation PUBLISHER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8897**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS L. MAINWARING**

Mailing Address **20 BEEKMAN PLACE**

City **QUEENSBURY** State **NY** Zip Code **12804-9707**

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

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8845**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HAROLD D. MCCORMACK**

Mailing Address **40 CEDARFIELD ROAD**

City **SYOSSET** State **NY** Zip Code **11791-**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8823**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETER W. MOYER**

Mailing Address **118 ABBEY PEAK LN**

City **INCLINE VILLAGE** State **NV** Zip Code **89451-9386**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8793**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

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

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

**850.00**

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

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

FOR LINE NUMBER: PAGE 59 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **340 MARLBOROUGH STREET**

City **BOSTON** State **MA** Zip Code **02115-1701**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8964**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **10400 WILLOW CREST COURT**

City **VIENNA** State **VA** Zip Code **22182-1852**

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

Name of Employer **CGCN GROUP** Occupation **PARTNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8960**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. PARSONS**

Mailing Address **104 RICHARD RD**

City **SYRACUSE** State **NY** Zip Code **13215-1530**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8851**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

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

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

**3200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>ALAN E. REDEKER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2016	
Mailing Address 23 HONEY HOLLOW RD.		<b>Transaction ID : SA11A.8912</b>	
City QUEENSBURY	State NY	Zip Code 12804-9117	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer N/A	Occupation RETIRED	Amount of Each Receipt this Period _____ 400.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) <b>DR. WILLIAM H. REYNOLDS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2016	
Mailing Address 32 OAKWOOD DRIVE		<b>Transaction ID : SA11A.8841</b>	
City QUEENSBURY	State NY	Zip Code 12804-1328	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer ADIRONDACK RADIOLOGY	Occupation MEDICAL DOCTOR	Amount of Each Receipt this Period _____ 1100.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1100.00		

Full Name (Last, First, Middle Initial) <b>PETER D. RICH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2016	
Mailing Address PO BOX 230		<b>Transaction ID : SA11A.8961</b>	
City THE PLAINS	State VA	Zip Code 20198-	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RICH FEUER ANDERSON	Occupation FOUNDING PRINCIPAL	Amount of Each Receipt this Period _____ 500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 1750.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 61 OF 120  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TODD M. RICKETTS**  
 Mailing Address 510 LAUREL AVE.  
 City State Zip Code  
 WILMETTE IL 60091-2812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF INVESTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 28 2016  
**Transaction ID : SA11A.8687**  
 Amount of Each Receipt this Period  
 5400.00  
 Memo Item  
 CONTRIBUTION  
 SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**TODD M. RICKETTS**  
 Mailing Address 510 LAUREL AVE.  
 City State Zip Code  
 WILMETTE IL 60091-2812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF INVESTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 30 2016  
**Transaction ID : SA11A.8745**  
 Amount of Each Receipt this Period  
 -2700.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**TODD M. RICKETTS**  
 Mailing Address 510 LAUREL AVE.  
 City State Zip Code  
 WILMETTE IL 60091-2812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF INVESTOR  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 30 2016  
**Transaction ID : SA11A.8746**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN K. RIFENBURG**

Mailing Address 129 DATER HILL RD

City State Zip Code  
TROY NY 12180-7303

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

Name of Employer Occupation  
RIFENBURG CONTRACTING PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8690**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RONALD V. ROBICHAUD**

Mailing Address 17 KILEY LANE

City State Zip Code  
QUEENSBURY NY 12804-1207

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8816**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN SAYLES**

Mailing Address 130 SHELDON DR.

City State Zip Code  
MECHANICVILLE NY 12118-1057

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.8885**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 63 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DR. ROBERT E. SHARP**

Mailing Address 16 HUNTER BROOK LANE

City State Zip Code  
QUEENSBURY NY 12804-5858

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

Name of Employer Occupation  
SELF-EMPLOYED DENTIST

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8764**

Amount of Each Receipt this Period  
75.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN J. ST AMOUR**

Mailing Address ONE LINCOLN CENTER STE 900

City State Zip Code  
SYRACUSE NY 13202-1188

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

Name of Employer Occupation  
GROSSMAN ST. AMOUR CPA'S PLLC CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8943**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELIZABETH MAY STERN**

Mailing Address 450 FORT HILL RD.

City State Zip Code  
SCARSDALE NY 10583-2413

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

Name of Employer Occupation  
N/A RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8689**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION  
REFUNDED \$2,300.00 ON 06/30/2016

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

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

2825.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARK R. STORCH**

Mailing Address 73 DAN TROY DRIVE

City State Zip Code  
WILLIAMSVILLE NY 14221-3551

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

Name of Employer Occupation  
STORCH COOPERATIVE DEVELOPMENT CONSULTING

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SA11A.8688**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CRAIG A. SWEET**

Mailing Address 25 BOULEVARD

City State Zip Code  
QUEENSBURY NY 12804-3903

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

Name of Employer Occupation  
ANGIO DYNAMICS INC MATERIAL HANDLER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
415.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SA11A.8918**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN R. VON SCHENK**

Mailing Address 75 COOLIDGE POINT LANE

City State Zip Code  
DIAMOND POINT NY 12824-

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

Name of Employer Occupation  
ADIRONDACK TRUST EVP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SA11A.8937**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

525.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **PO BOX 296**

City **GLENS FALLS** State **NY** Zip Code **12801-0296**

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

Name of Employer **ADIRONDACK TRUST** Occupation **RESIDENTIAL LOAN CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8942**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**CENTOLELLA LYNN D'ELIA & TEMES LLC**

Mailing Address **100 MADISON STREET TOWER 1 STE 190**

City **SYRACUSE** State **NY** Zip Code **13202-2703**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8934**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

**SEE ATTRIBUTION BELOW; SEE REDESIGNATION**

**C.** Full Name (Last, First, Middle Initial)  
**JASON J. CENTOLELLA**

Mailing Address **100 MADISON STREET STE 1905**

City **SYRACUSE** State **NY** Zip Code **13202-2703**

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

Name of Employer **CENTOLELLA LYNN D'ELIA & TEMES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8969**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**PARTNERSHIP ATTRIBUTION; SEE REDESIGNATION**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 100 MADISON STREET STE 1905

City SYRACUSE	State NY	Zip Code 13202-2703
------------------	-------------	------------------------

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

Name of Employer CENTOLELLA LYNN D'ELIA & TEMES LLC	Occupation ATTORNEY
--	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8970**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GARY RANDAL GREEN**

Mailing Address 100 MADISON STREET STE 1905

City SYRACUSE	State NY	Zip Code 13202-2703
------------------	-------------	------------------------

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

Name of Employer CENTOLELLA LYNN D'ELIA & TEMES LLC	Occupation ATTORNEY/DOCTOR
--	-------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8968**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

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

Mailing Address 100 MADISON STREET STE 1905

City SYRACUSE	State NY	Zip Code 13202-2703
------------------	-------------	------------------------

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

Name of Employer CENTOLELLA LYNN D'ELIA & TEMES LLC	Occupation LAWYER
--	----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11A.8967**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CENTOLELLA LYNN D'ELIA & TEMES LLC**

Mailing Address 100 MADISON STREET TOWER 1 STE 190

City SYRACUSE State NY Zip Code 13202-2703

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8971**

Amount of Each Receipt this Period  
**-300.00**

Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**CENTOLELLA LYNN D'ELIA & TEMES LLC**

Mailing Address 100 MADISON STREET TOWER 1 STE 190

City SYRACUSE State NY Zip Code 13202-2703

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.8972**

Amount of Each Receipt this Period  
**300.00**

Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**GO AHEAD LLC**

Mailing Address 90 CAMPBELL ROAD

City SCHENECTADY State NY Zip Code 12306-

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11A.9011**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW

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

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

**500.00**

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

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

FOR LINE NUMBER: PAGE 68 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 90 CAMPBELL ROAD

City State Zip Code  
SCHENECTADY NY 12306-

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

Name of Employer Occupation  
GO AHEAD LLC OWNER/PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11A.9013**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION  
PARTNERSHIP ATTRIBUTION

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

Mailing Address 133 DUDDINGTON PLACE SE

City State Zip Code  
WASHINGTON DC 20003-2625

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

Name of Employer Occupation  
NATHANSON+HAUCK CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : SA11A.8738**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 17 LOZIER PLACE

City State Zip Code  
PLATTSBURGH NY 12901-1618

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : SA11A.8739**

Amount of Each Receipt this Period  
350.00

Memo Item  
CONTRIBUTION

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 1577 MADDUX LN

City MCLEAN State VA Zip Code 22101-3245

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

Name of Employer RAYTHEON COMPANY Occupation BUSINESS DEVELOPMENT DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2016

**Transaction ID : SA11A.8740**

Amount of Each Receipt this Period  
501.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 130

City RIDGE State MD Zip Code 20680-0130

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

Name of Employer PODESTA GROUP Occupation PRINCIPAL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11A.8752**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 601 PRESIDENT FORD LANE

City ALEXANDRIA State VA Zip Code 22302-3033

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

Name of Employer FIERCE, ISAKOWITZ & BLALOCK Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11A.8751**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

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

1501.00

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

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

FOR LINE NUMBER: PAGE 70 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 500 TOTTEN POND ROAD

City State Zip Code  
WALTHAM MA 02451-1908

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

Name of Employer Occupation  
J.W. CHILDS ASSOCIATES CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11A.8756**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 8727 VISTA VIEW DR.

City State Zip Code  
DALLAS TX 75243-7256

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

Name of Employer Occupation  
PODESTA GROUP LOBBYIST

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11A.8748**

Amount of Each Receipt this Period  
 500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 499 SOUTH CAPITOL ST SW

City State Zip Code  
WASHINGTON DC 20003-4013

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

Name of Employer Occupation  
CAPITOL HILL CONSULTING CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11A.8750**

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN P. LEARY**

Mailing Address **26 MACORY WAY**

City **GANSEVOORT** State **NY** Zip Code **12831-1157**

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

Name of Employer **WARREN ANESTHESIOLOGISTS** Occupation **ANESTHSIOLOGIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **351.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : SA11A.8755**

Amount of Each Receipt this Period  
**21.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **1300 CONNECTICUT AVENUE NW**

City **WASHINGTON** State **DC** Zip Code **20036-1703**

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

Name of Employer **PECK MADIGAN JONES** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : SA11A.8741**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **39 WOODCREST DRIVE**

City **MORRISTOWN** State **NJ** Zip Code **07960-4540**

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

Name of Employer **SCHULTE ROTH& ZABEL** Occupation **LAWYER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : SA11A.8749**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

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

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

**1521.00**

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

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

FOR LINE NUMBER: PAGE 72 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**H JOHN SCHUTZE D.D.S.**

Mailing Address **453 DIXON ROAD**

City **QUEENSBURY** State **NY** Zip Code **12804-1949**

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

Name of Employer **SCHUTZE FAMILY DENTISTRY P.C.** Occupation **DENTIST**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
**06 / 30 / 2016**

**Transaction ID : SA11A.8747**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

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

Mailing Address **801 FRONTAGE ROAD #203**

City **OXFORD** State **MS** Zip Code **38655-5124**

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

Name of Employer **UNIVERSITY OF MISSISSIPPI** Occupation **PROFESSOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
**06 / 30 / 2016**

**Transaction ID : SA11A.8754**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

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

**350.00**

**138938.00**



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

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

FOR LINE NUMBER: PAGE 73 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO REELECT KATE HOGAN WARREN COUNTY DISTRICT ATTN**

Mailing Address 291 RIDGE STREET

City State Zip Code  
GLENS FALLS NY 12801-2418

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
190.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11C.8400**

Amount of Each Receipt this Period  
40.00

Memo Item  
CONTRIBUTION  
FEDERALLY PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT JUDGE TIMOTHY LAWLISS**

Mailing Address 16 HILLSIDE DRIVE

City State Zip Code  
PERU NY 12972-4616

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11C.8410**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION  
FEDERALLY PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**AGRI-MARK INC PAC**

Mailing Address 100 MILK STREET

City State Zip Code  
METHUEN MA 01844-4662

FEC ID number of contributing federal political committee. **C** C00141242

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : SA11C.8395**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

390.00

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

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

FOR LINE NUMBER: PAGE 74 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BROWNSTEIN HYATT FARBER SCHRECK PAC**

Mailing Address 410 SEVENTEENTH STREET  
SUITE 2200

City State Zip Code  
DENVER CO 80202-4432

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SA11C.8415**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL SCHOOL TRANSPORTATION ASSOCIATION PAC**

Mailing Address 122 SOUTH ROYAL STREET

City State Zip Code  
ALEXANDRIA VA 22314-3328

FEC ID number of contributing federal political committee. **C C00179275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SA11C.8414**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FRENCH HILL FOR ARKANSAS**

Mailing Address PO BOX 7841

City State Zip Code  
LITTLE ROCK AR 72217-7800

FEC ID number of contributing federal political committee. **C C00551275**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11C.8464**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 75 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. ADVANCED MEDICAL TECHNOLOGY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 PENNSYLVANIA AVE NW  
 STE 800  
 City WASHINGTON State DC Zip Code 20004-2654  
 FEC ID number of contributing federal political committee. **C C00340356**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.8456**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B. CHARTER COMMUNICATIONS INC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 ATLANTIC STREET  
 10TH FLOOR  
 City STAMFORD State CT Zip Code 06901-3512  
 FEC ID number of contributing federal political committee. **C C00426775**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.8454**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**C. CORNING INCORPORATED EMPLOYEES PAC (COREPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 325 7TH STREET NW  
 SUITE 600  
 City WASHINGTON State DC Zip Code 20004-2805  
 FEC ID number of contributing federal political committee. **C C00033589**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.8452**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address **PO BOX 18254**

City **WASHINGTON** State **DC** Zip Code **20036-8254**

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2016**

**Transaction ID : SA11C.8442**

Amount of Each Receipt this Period  
**4000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Mailing Address **2901 TELESTAR CT**

City **FALLS CHURCH** State **VA** Zip Code **22042-1260**

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2016**

**Transaction ID : SA11C.8445**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Mailing Address **2901 TELESTAR CT**

City **FALLS CHURCH** State **VA** Zip Code **22042-1260**

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2016**

**Transaction ID : SA11C.8446**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

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

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

**7000.00**

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

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

FOR LINE NUMBER: PAGE 77 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC**

Mailing Address 1600 DUKE STREET

City State Zip Code  
ALEXANDRIA VA 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8455**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PINNACLE WEST CORPORATION PAC**

Mailing Address 801 PENNSYLVANIA AVE NW SUITE 214

City State Zip Code  
WASHINGTON DC 20004-2680

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8447**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**S. C. JOHNSON & SON INC PAC**

Mailing Address 1525 HOWE STREET

City State Zip Code  
RACINE WI 53403-2237

FEC ID number of contributing federal political committee. **C C00342246**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8465**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 78 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TIAA-CREF PAC**

Mailing Address 601 THIRTEENTH STREET, NW  
SUITE 700 NORTH

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8448**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TUESDAY GROUP PAC**

Mailing Address 209 PENNSYLVANIA AVENUE, S.E.

City WASHINGTON State DC Zip Code 20003-1107

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8449**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**UBS AMERICAS INC PAC**

Mailing Address 400 ATLANTIC STREET  
C/O PER DYRVIK

City STAMFORD State CT Zip Code 06901-3512

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8453**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**US CHAMBER PAC**

Mailing Address 1615 H STREET NW

City WASHINGTON State DC Zip Code 20062-0001

FEC ID number of contributing federal political committee. **C C00082040**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA11C.8444**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 919 CONGRESS AVENUE  
SUITE 1400

City AUSTIN State TX Zip Code 78701-2114

FEC ID number of contributing federal political committee. **C C00387464**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11C.8491**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES PAC**

Mailing Address 1575 I STREET NW

City WASHINGTON State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C C00041566**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11C.8483**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. BUILDING AMERICA'S REPUBLICAN REPRESENTATION PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 332 W LEE HWY  
303

City State Zip Code  
WARRENTON VA 20186-2428

FEC ID number of contributing federal political committee. **C C00572271**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11C.8490**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. COMCAST CORPORATION & NBC UNIVERSAL PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1701 JFK BLVD 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11C.8482**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C. DIGITALGLOBE PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1300 WEST 120TH AVENUE

City State Zip Code  
WESTMINSTER CO 80234-2726

FEC ID number of contributing federal political committee. **C C00370585**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : SA11C.8487**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. GROOM LAW GROUP CHARTERED PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1701 PENNSYLVANIA AVENUE, NW

City WASHINGTON State DC Zip Code 20006-5805

FEC ID number of contributing federal political committee. **C C00394775**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11C.8493**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B. INDEPENDENT COMMUNITY BANKERS PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1615 L STREET, NW SUITE 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11C.8486**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. MACHINISTS NON-PARTISAN POLITICAL LEAGUE PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 9000 MACHINISTS PLACE

City UPPER MARLBORO State MD Zip Code 20772-2675

FEC ID number of contributing federal political committee. **C C00002469**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : SA11C.8495**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. MAVERICK PAC USA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 CONANT ST  
 City BEVERLY State MA Zip Code 01915-1665  
 FEC ID number of contributing federal political committee. **C** C00427435  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016  
**Transaction ID : SA11C.8479**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item  
 CONTRIBUTION

**B. MVP HEALTH CARE INC FEDERAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 625 STATE STREET  
 City SCHENECTADY State NY Zip Code 12305-2111  
 FEC ID number of contributing federal political committee. **C** C00431429  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016  
**Transaction ID : SA11C.8485**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C. COMMITTEE TO ELECT JUDGE TIMOTHY LAWLISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 HILLSIDE DRIVE  
 City PERU State NY Zip Code 12972-4616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11C.8940**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item  
 CONTRIBUTION  
 FEDERALLY PERMISSIBLE FUNDS

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

4040.00

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

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

FOR LINE NUMBER: PAGE 83 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT JEFF MURPHY FOR SHERIFF**

Mailing Address 1 ROGEY LANE

City HUDSON FALLS State NY Zip Code 12839-

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.9012**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION  
 FEDERALLY PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**HAMILTON COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 253

City SPECULATOR State NY Zip Code 12164-0253

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.9009**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION  
 FEDERALLY PERMISSIBLE FUNDS

**C.** Full Name (Last, First, Middle Initial)  
**WARREN COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 4153

City QUEENSBURY State NY Zip Code 12804-0153

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8916**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION  
 FEDERALLY PERMISSIBLE FUNDS

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WASHINGTON COUNTY REPUBLICAN COMMITTEE**

Mailing Address 184 GLEN STREET

City State Zip Code  
GLENS FALLS NY 12801-3526

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.9010**

Amount of Each Receipt this Period  
750.00

Memo Item  
CONTRIBUTION  
FEDERALLY PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City State Zip Code  
WASHINGTON DC 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8917**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL ASSOCIATION PAC**

Mailing Address 1111 14TH STREET NW SUITE 1100

City State Zip Code  
WASHINGTON DC 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8927**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

750.00

3000.00

2000.00

5750.00

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

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

FOR LINE NUMBER: PAGE 85 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AT&T INC FEDERAL PAC**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8930**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1201 15TH STREET NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8913**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CONSERVATIVE OPPORTUNITIES FOR A NEW AMERICA**

Mailing Address 110 W. LOUISIANA AVE STE 312

City MIDLAND State TX Zip Code 79701-3414

FEC ID number of contributing federal political committee. **C C00409458**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8915**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 86 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11C.8932**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EXPRESS SCRIPTS PAC**

Mailing Address 300 NEW JERSEY AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001-2267

FEC ID number of contributing federal political committee. **C C00365072**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11C.8954**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FINANCIAL SERVICES INSTITUTE INC PAC**

Mailing Address 607 14TH ST NW  
SUITE 750

City WASHINGTON State DC Zip Code 20005-2085

FEC ID number of contributing federal political committee. **C C00409714**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SA11C.8957**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. FIRST IN FREEDOM PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 S. WASHINGTON ST., STE. 115  
 City State Zip Code  
 ALEXANDRIA VA 22314-5404  
 FEC ID number of contributing federal political committee. **C C00540146**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11C.8936**  
 Amount of Each Receipt this Period  
 4000.00  
 Memo Item  
 CONTRIBUTION

**B. FORD MOTOR COMPANY CIVIC ACTION FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 75000  
 City State Zip Code  
 DETROIT MI 48275-0001  
 FEC ID number of contributing federal political committee. **C C00046474**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11C.8911**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
 CONTRIBUTION

**C. GLOVER PARK PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13TH STREET, NW  
 SUITE 600  
 City State Zip Code  
 WASHINGTON DC 20005-5998  
 FEC ID number of contributing federal political committee. **C C00466094**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11C.8952**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION PAC (H-PAC)**

Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850E

City WASHINGTON State DC Zip Code 20024-2566

FEC ID number of contributing federal political committee. **C C00100321**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8933**

Amount of Each Receipt this Period  
4000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN DEERE PAC**

Mailing Address ONE JOHN DEERE PLACE

City MOLINE State IL Zip Code 61265-8010

FEC ID number of contributing federal political committee. **C C00204099**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8956**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LIBERTY & PROSPERITY PAC**

Mailing Address 19 CATTANO AVENUE

City MORRISTOWN State NJ Zip Code 07960-6839

FEC ID number of contributing federal political committee. **C C00492538**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8935**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

8000.00



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

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

FOR LINE NUMBER: PAGE 89 OF 120  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**MARATHON PETROLEUM CORPORATION EMPLOYEES PAC**

Mailing Address 539 SOUTH MAIN STREET

City FINDLAY State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C C00496307**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8921**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. Full Name (Last, First, Middle Initial)**  
**METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A**

Mailing Address 1095 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036-6797

FEC ID number of contributing federal political committee. **C C00040923**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8928**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C. Full Name (Last, First, Middle Initial)**  
**MR. SOUTHERN MISSOURIAN IN THE HOUSE PAC (MR. SMITH PAC)**

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C C00563726**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.9008**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. NATIONAL RESTAURANT ASSOCIATION PAC**

Full Name (Last, First, Middle Initial)  
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 2055 L STREET NW

City WASHINGTON State DC Zip Code 20036-4983

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8924**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
**CONTRIBUTION**

**B. NATIONAL RETAIL FEDERATION (RETAIL PAC)**

Full Name (Last, First, Middle Initial)  
NATIONAL RETAIL FEDERATION (RETAIL PAC)

Mailing Address 1101 NEW YORK AVENUE, NW  
SUITE 1200

City WASHINGTON State DC Zip Code 20005-4348

FEC ID number of contributing federal political committee. **C** C00040329

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8929**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
**CONTRIBUTION**

**C. PATRIOTS LEADING A MAJORITY**

Full Name (Last, First, Middle Initial)  
PATRIOTS LEADING A MAJORITY

Mailing Address 50 S PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063-3531

FEC ID number of contributing federal political committee. **C** C00526046

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8953**

Amount of Each Receipt this Period  
 1000.00

Memo Item  
**CONTRIBUTION**

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REAL ESTATE ROUNDTABLE PAC**

Mailing Address **801 PENNSYLVANIA AVENUE**  
**SUITE 720**

City **WASHINGTON** State **DC** Zip Code **20004-2686**

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11C.8963**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SIERRA NEVADA PAC**

Mailing Address **P.O. BOX 50193**

City **SPARKS** State **NV** Zip Code **89435-0193**

FEC ID number of contributing federal political committee. **C C00367995**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11C.8955**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**UBS AMERICAS INC PAC**

Mailing Address **400 ATLANTIC STREET**  
**C/O PER DYRVIK**

City **STAMFORD** State **CT** Zip Code **06901-3512**

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA11C.8931**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
CONTRIBUTION

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

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

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8919**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VICTORY AND FREEDOM PAC**

Mailing Address 1666 K ST, NW  
STE 500

City WASHINGTON State DC Zip Code 20006-1218

FEC ID number of contributing federal political committee. **C C00525212**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA11C.8939**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

3000.00

102930.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 120
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**WINNING WOMEN VICTORY COMMITTEE**

Mailing Address 228 S WASHINGTON ST

City State Zip Code  
ALEXANDRIA VA 22314-

FEC ID number of contributing federal political committee. **C** C00613752

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13799.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.8975**

Amount of Each Receipt this Period  
6899.85

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B.** Full Name (Last, First, Middle Initial)  
**DONNA Y STEPHENSON**

Mailing Address PO BOX 43326

City State Zip Code  
ATLANTA GA 30336-

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.9002**

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER  
JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**JAMES E STEPHENSON**

Mailing Address PO BOX 43326

City State Zip Code  
ATLANTA GA 30336-

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

Name of Employer Occupation  
YANCEY BROS CO. CHAIRMAN/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.9003**

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER  
JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

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

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

6899.85

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

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

FOR LINE NUMBER: PAGE 94 OF 120  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PATRICIA B TERWILLIGER**

Mailing Address 6020 WINTERTHUR DRIVE

City ATLANTA State GA Zip Code 30328-

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.9004**

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**WINNING WOMEN VICTORY COMMITTEE**

Mailing Address 228 S WASHINGTON ST

City ALEXANDRIA State VA Zip Code 22314-

FEC ID number of contributing federal political committee. **C** C00613752

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13799.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.8976**

Amount of Each Receipt this Period  
6899.85

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**C.** Full Name (Last, First, Middle Initial)  
**DONNA Y STEPHENSON**

Mailing Address PO BOX 43326

City ATLANTA State GA Zip Code 30336-

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : SA12.9014**

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

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

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

6899.85

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 120
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES E STEPHENSON**

Mailing Address **PO BOX 43326**

City **ATLANTA** State **GA** Zip Code **30336-**

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

Name of Employer **YANCEY BROS CO.** Occupation **CHAIRMAN/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA12.9006**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

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

Mailing Address **6020 WINTERTHUR DRIVE**

City **ATLANTA** State **GA** Zip Code **30328-**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : SA12.9007**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: WINNING WOMEN VICTORY COMMITTEE

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

**0.00**

**13799.70**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. UPS STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2016
Mailing Address 175 BROAD STREET		Amount of Each Disbursement this Period 38.04
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement DELIVERY	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80809</b>
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>B. ADP</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016
Mailing Address PO BOX 842875		Amount of Each Disbursement this Period 67.96
City BOSTON	State MA	
Zip Code 02284	Purpose of Disbursement PAYROLL SERVICE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80836</b>
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>C. PARKING MANAGEMENT INC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016
Mailing Address 1725 DESALES STREET NW STE 300		Amount of Each Disbursement this Period 12.00
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80854</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	118.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 6.11
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80843</b>
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>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 235.00
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80844</b>
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>C. JOEL WOOD</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 102 OAK STREET APT 3		Amount of Each Disbursement this Period 988.00
City PLATTSBURGH	State NY	
Zip Code 12901	Purpose of Disbursement BALLOT ACCESS CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80802</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1229.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. COFFEE SPEKTOR</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 140 GLEN STREET		Amount of Each Disbursement this Period 18.65
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80815</b>
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>B. CRESCENT MOON CATERING</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 32 CRONIN ROAD		Amount of Each Disbursement this Period 131.93
City QUEENSBURY	State NY	
Zip Code 12804	Purpose of Disbursement CATERING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80800</b>
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>C. SCM ASSOCIATES INC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 1283 MAIN STREET PO BOX 254		Amount of Each Disbursement this Period 6561.59
City DUBLIN	State NH	
Zip Code 03444	Purpose of Disbursement PRINTING/POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80851</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6712.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 45.71
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80845</b>
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>B. WALMART SUPERCENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2016
Mailing Address 891 STATE ROUTE 9		Amount of Each Disbursement this Period 234.97
City QUEENSBURY	State NY	
Zip Code 12804	Purpose of Disbursement FOOD/BEVERAGE/OFFICE SUPPLIES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80813</b>
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>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2016
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 50.00
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80804</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	330.68
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. CMDI</b>		<input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2016"/>
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period <input type="text" value="798.00"/>
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATABASE MANAGEMENT SERVICE		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought:	Disbursement For:	<b>Transaction ID : SB17.80808</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. CMDI</b>		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period <input type="text" value="398.82"/>
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement CREDIT CARD MERCHANT FEES		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought:	Disbursement For:	<b>Transaction ID : SB17.80805</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. EZ PASS</b>		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
Mailing Address 911 OLD LIVERPOOL ROAD #2		Amount of Each Disbursement this Period <input type="text" value="25.00"/>
City LIVERPOOL	State NY Zip Code 13088	
Purpose of Disbursement TRAVEL		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought:	Disbursement For:	<b>Transaction ID : SB17.80856</b>
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="1221.82"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 182 HOWARD ST STE #8		Amount of Each Disbursement this Period 9,999.99 20.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80855</b>
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>B. UPS STORE</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 175 BROAD STREET		Amount of Each Disbursement this Period 9,999.99 53.39
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement DELIVERY	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80810</b>
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>C. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 9,999.99 16.94
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80846</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	90.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. JONATHAN CARMAN</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address PO BOX 500		Amount of Each Disbursement this Period 1157.51 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.80829</b>
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ALEXANDER DEGRASSE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address PO BOX 500		Amount of Each Disbursement this Period 1129.51 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.80830</b>
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. JACK MOULTON</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address 221 GLEN STREET APT 211		Amount of Each Disbursement this Period 1450.26 <input type="checkbox"/> Memo Item <b>Transaction ID : SB17.80831</b>
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3737.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY PILEGGI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2016</b>
Mailing Address <b>PO BOX 500</b>		Amount of Each Disbursement this Period <b>2454.85</b>
City <b>GLENS FALLS</b>	State <b>NY</b>	Zip Code <b>12801</b>
Purpose of Disbursement <b>PAYROLL</b>	Category/Type	
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:	<b>Transaction ID : SB17.80832</b>	

Full Name (Last, First, Middle Initial) <b>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2016</b>
Mailing Address <b>50 MASSACHUSETTS AVE NE</b>		Amount of Each Disbursement this Period <b>433.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20002</b>
Purpose of Disbursement <b>TRAVEL</b>	Category/Type	
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:	<b>Transaction ID : SB17.80858</b>	

Full Name (Last, First, Middle Initial) <b>C. INTERNAL REVENUE SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2016</b>
Mailing Address <b>1111 CONSTITUTION AVE</b>		Amount of Each Disbursement this Period <b>2302.67</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20224</b>
Purpose of Disbursement <b>PAYROLL TAXES</b>	Category/Type	
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:	<b>Transaction ID : SB17.80839</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5190.52</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. NEW YORK DEPARTMENT OF REVENUE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2016</b>
Mailing Address <b>PO BOX 4127</b>		Amount of Each Disbursement this Period <b>799.75</b>
City <b>BINGHAMTON</b>	State <b>NY</b> Zip Code <b>13902</b>	
Purpose of Disbursement <b>PAYROLL TAXES</b>	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	<b>Transaction ID : SB17.80838</b>	
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>B. SUNOCO</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2016</b>
Mailing Address <b>353 N PETERSBORO ST I-90</b>		Amount of Each Disbursement this Period <b>37.23</b>
City <b>CANASTOTA</b>	State <b>NY</b> Zip Code <b>13032</b>	
Purpose of Disbursement <b>TRAVEL</b>	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	<b>Transaction ID : SB17.80857</b>	
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>C. BUTCHER BLOCK</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>15 BOOTH DR</b>		Amount of Each Disbursement this Period <b>403.20</b>
City <b>PLATTSBURGH</b>	State <b>NY</b> Zip Code <b>12901</b>	
Purpose of Disbursement <b>FOOD/BEVERAGES</b>	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	<b>Transaction ID : SB17.80816</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1240.18</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016
Mailing Address 300 FIRST ST, SE		Amount of Each Disbursement this Period 95.40
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80817</b>
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>B. CLOUDAGE STRATEGIES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016
Mailing Address 362 TOMAQUAG RD		Amount of Each Disbursement this Period 8000.00
City ASHAWAY	State RI	
Zip Code 02804	Purpose of Disbursement WEB SERVICE/EQUIPMENT RENTAL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80872</b>
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>C. HARVARD CLUB OF NEW YORK CITY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016
Mailing Address PO BOX 9486		Amount of Each Disbursement this Period 1447.75
City NEW YORK	State NY	
Zip Code 10087	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80859</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9543.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. NEW FRONTIER STRATEGY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>315 KENTUCKY AVE</b>		Amount of Each Disbursement this Period <b>2500.00</b>
City <b>ALEXANDRIA</b>	State <b>VA</b> Zip Code <b>22305</b>	
Purpose of Disbursement <b>POLITICAL STRATEGY CONSULTING</b>		<input type="checkbox"/> Memo Item
Candidate Name		<b>Transaction ID : SB17.80842</b>
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. SCM ASSOCIATES INC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>1283 MAIN STREET PO BOX 254</b>		Amount of Each Disbursement this Period <b>786.61</b>
City <b>DUBLIN</b>	State <b>NH</b> Zip Code <b>03444</b>	
Purpose of Disbursement <b>PRINTING</b>		<input type="checkbox"/> Memo Item
Candidate Name		<b>Transaction ID : SB17.80850</b>
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. SCR &amp; ASSOCIATES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>100 TRADECENTER STE G-700</b>		Amount of Each Disbursement this Period <b>2500.00</b>
City <b>WOBURN</b>	State <b>MA</b> Zip Code <b>01801</b>	
Purpose of Disbursement <b>FINANCE CONSULTING</b>		<input type="checkbox"/> Memo Item
Candidate Name		<b>Transaction ID : SB17.80812</b>
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5786.61</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. WILEY REIN LLP</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2016
Mailing Address 1776 K ST NW		Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement LEGAL CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80825</b>
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>B. ANTHONY PILEGGI</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2016
Mailing Address 19 TREASURERS PLACE		Amount of Each Disbursement this Period 194.85
City QUEENSBURY	State NY	
Zip Code 12804	Purpose of Disbursement TRAVEL- MILEAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80871</b>
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>C. CAPITOL LOUNGE</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2016
Mailing Address 231 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 29.50
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80818</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2724.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. HANNAFORD SUPERMARKET</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 21 / 2016</b>
Mailing Address <b>175 BROAD ST</b>		Amount of Each Disbursement this Period <b>67.20</b>
City <b>GLENS FALLS</b> State <b>NY</b> Zip Code <b>12801</b>	Purpose of Disbursement <b>FOOD/BEVERAGES</b>	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.80819</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. NYC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 21 / 2016</b>
Mailing Address <b>31-00 47TH AVENUE 3RD FL</b>		Amount of Each Disbursement this Period <b>9.35</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>11101</b>	Purpose of Disbursement <b>TRAVEL</b>	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.80861</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. UBER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 21 / 2016</b>
Mailing Address <b>182 HOWARD ST STE #8</b>		Amount of Each Disbursement this Period <b>30.92</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRAVEL</b>	
Candidate Name		<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : SB17.80860</b>
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>107.47</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 19.49
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement POSTAGE	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80847</b>
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>B. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address 50 MASSACHUSETTS AVE NE		Amount of Each Disbursement this Period 60.00
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80862</b>
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>C. ANGELINA'S PIZZERIA</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address 216 QUAKER RD		Amount of Each Disbursement this Period 37.74
City QUEENSBURY	State NY	
Zip Code 12804	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80820</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	117.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 482.04
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement CREDIT CARD MERCHANT FEES		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : <b>SB17.80806</b>
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. HANNAFORD SUPERMARKET</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address 175 BROAD ST		Amount of Each Disbursement this Period 28.95
City GLENS FALLS	State NY Zip Code 12801	
Purpose of Disbursement FOOD/BEVERAGES		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : <b>SB17.80821</b>
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. NYC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016
Mailing Address 31-00 47TH AVENUE 3RD FL		Amount of Each Disbursement this Period 11.75
City NEW YORK	State NY Zip Code 11101	
Purpose of Disbursement TRAVEL		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : <b>SB17.80863</b>
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	522.74
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE HARTFORD</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 22 / 2016</b>	
Mailing Address <b>PO BOX 783690</b>			Amount of Each Disbursement this Period <b>13.14</b>	
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19178</b>	Memo Item <input type="checkbox"/>	
Purpose of Disbursement <b>INSURANCE</b>		Category/ Type	Transaction ID : <b>SB17.80824</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 22 / 2016</b>	
Mailing Address <b>PO BOX 25505</b>			Amount of Each Disbursement this Period <b>355.35</b>	
City <b>LEHIGH VALLEY</b>	State <b>PA</b>	Zip Code <b>18002</b>	Memo Item <input type="checkbox"/>	
Purpose of Disbursement <b>TELEPHONE SERVICE</b>		Category/ Type	Transaction ID : <b>SB17.80853</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ADP</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 24 / 2016</b>	
Mailing Address <b>PO BOX 842875</b>			Amount of Each Disbursement this Period <b>72.68</b>	
City <b>BOSTON</b>	State <b>MA</b>	Zip Code <b>02284</b>	Memo Item <input type="checkbox"/>	
Purpose of Disbursement <b>PAYROLL SERVICE</b>		Category/ Type	Transaction ID : <b>SB17.80837</b>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>441.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. DELTA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2016
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 241.10
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement TRAVEL	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : <b>SB17.80864</b>	
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>B. STAPLES</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2016
Mailing Address 752 UPPERGLEN ST		Amount of Each Disbursement this Period 70.82
City QUEENSBURY	State NY Zip Code 12804	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : <b>SB17.80826</b>	
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>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2016
Mailing Address 16 HUDSON AVE		Amount of Each Disbursement this Period 28.97
City GLENS FALLS	State NY Zip Code 12801	
Purpose of Disbursement POSTAGE	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Transaction ID : <b>SB17.80848</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	340.89
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. COFFEE SPEKTOR</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2016
Mailing Address 140 GLEN STREET		Amount of Each Disbursement this Period 13.91
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80822</b>
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>B. HANNAFORD SUPERMARKET</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2016
Mailing Address 175 BROAD ST		Amount of Each Disbursement this Period 21.14
City GLENS FALLS	State NY	
Zip Code 12801	Purpose of Disbursement FOOD/BEVERAGES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80823</b>
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>C. SUNOCO</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2016
Mailing Address 353 N PETERSBORO ST I-90		Amount of Each Disbursement this Period 25.85
City CANASTOTA	State NY	
Zip Code 13032	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	<b>Transaction ID : SB17.80865</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	60.90
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. U-HAUL CENTER</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2016
Mailing Address 6229 US 11		Amount of Each Disbursement this Period 109.95
City CANTON	State NY	
Zip Code 13617	Purpose of Disbursement EQUIPMENT RENTAL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80811</b>
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>B. UBER</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address 182 HOWARD ST STE #8		Amount of Each Disbursement this Period 25.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80866</b>
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>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 1273.80
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEES	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : SB17.80807</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1408.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 29 / 2016</b>
Mailing Address <b>PO BOX 365</b>		Amount of Each Disbursement this Period <b>2100.00</b>
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101</b>
Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	Category/Type	
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:	<b>Transaction ID : SB17.80801</b>	

Full Name (Last, First, Middle Initial) <b>B. NYC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 29 / 2016</b>
Mailing Address <b>31-00 47TH AVENUE 3RD FL</b>		Amount of Each Disbursement this Period <b>22.25</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>11101</b>
Purpose of Disbursement <b>TRAVEL</b>	Category/Type	
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:	<b>Transaction ID : SB17.80867</b>	

Full Name (Last, First, Middle Initial) <b>C. NYC TAXI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 29 / 2016</b>
Mailing Address <b>31-00 47TH AVENUE 3RD FL</b>		Amount of Each Disbursement this Period <b>50.19</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>11101</b>
Purpose of Disbursement <b>TRAVEL</b>	Category/Type	
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:	<b>Transaction ID : SB17.80868</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2172.44</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

**A. STAPLES**

Full Name (Last, First, Middle Initial)  
Mailing Address 752 UPPERGLEN ST

City QUEENSBURY State NY Zip Code 12804

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 29 / 2016

Amount of Each Disbursement this Period: 7.80

Memo Item

Transaction ID : SB17.80827

**B. STAPLES**

Full Name (Last, First, Middle Initial)  
Mailing Address 752 UPPERGLEN ST

City QUEENSBURY State NY Zip Code 12804

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 29 / 2016

Amount of Each Disbursement this Period: 36.05

Memo Item

Transaction ID : SB17.80828

**C. UBER**

Full Name (Last, First, Middle Initial)  
Mailing Address 182 HOWARD ST STE #8

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 29 / 2016

Amount of Each Disbursement this Period: 7.69

Memo Item

Transaction ID : SB17.80869

**SUBTOTAL** of Disbursements This Page (optional) ..... 51.54

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. WALMART SUPERCENTER</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016	
Mailing Address 891 STATE ROUTE 9			Amount of Each Disbursement this Period 80.97	
City QUEENSBURY	State NY	Zip Code 12804	Memo Item <input type="checkbox"/>	
Purpose of Disbursement FOOD/BEVERAGE/OFFICE SUPPLIES		Category/ Type		
Candidate Name			Transaction ID : <b>SB17.80814</b>	
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>B. ALEXANDER DEGRASSE</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016	
Mailing Address PO BOX 500			Amount of Each Disbursement this Period 1129.51	
City GLENS FALLS	State NY	Zip Code 12801	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name			Transaction ID : <b>SB17.80833</b>	
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>C. JACK MOULTON</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016	
Mailing Address 221 GLEN STREET APT 211			Amount of Each Disbursement this Period 1450.26	
City GLENS FALLS	State NY	Zip Code 12801	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name			Transaction ID : <b>SB17.80834</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2660.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY PILEGGI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>PO BOX 500</b>		Amount of Each Disbursement this Period <b>2497.04</b>
City <b>GLENS FALLS</b>	State <b>NY</b>	Zip Code <b>12801</b>
Purpose of Disbursement <b>PAYROLL</b>	Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>Transaction ID : SB17.80835</b>	

Full Name (Last, First, Middle Initial) <b>B. CAPITAL DISTRICT TRANSPORTATION AUTHORITY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>525 EAST ST</b>		Amount of Each Disbursement this Period <b>44.00</b>
City <b>RENSSELAER</b>	State <b>NY</b>	Zip Code <b>12144</b>
Purpose of Disbursement <b>TRAVEL</b>	Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>Transaction ID : SB17.80870</b>	

Full Name (Last, First, Middle Initial) <b>C. INTERNAL REVENUE SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>1111 CONSTITUTION AVE</b>		Amount of Each Disbursement this Period <b>1919.29</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20224</b>
Purpose of Disbursement <b>PAYROLL TAXES</b>	Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>Transaction ID : SB17.80841</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4460.33</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. NEW YORK DEPARTMENT OF REVENUE</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>PO BOX 4127</b>			Amount of Each Disbursement this Period <b>650.50</b>
City <b>BINGHAMTON</b>	State <b>NY</b>	Zip Code <b>13902</b>	
Purpose of Disbursement <b>PAYROLL TAXES</b>		Category/ Type	<input type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.80840</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>16 HUDSON AVE</b>			Amount of Each Disbursement this Period <b>49.28</b>
City <b>GLENS FALLS</b>	State <b>NY</b>	Zip Code <b>12801</b>	
Purpose of Disbursement <b>POSTAGE</b>		Category/ Type	<input type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.80849</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. WASHINGTON STREET PROPERTIES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2016</b>
Mailing Address <b>215 WASHINGTON ST STE 001</b>			Amount of Each Disbursement this Period <b>1675.00</b>
City <b>WATERTOWN</b>	State <b>NY</b>	Zip Code <b>13601</b>	
Purpose of Disbursement <b>RENT</b>		Category/ Type	<input type="checkbox"/> Memo Item
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)		<b>Transaction ID : SB17.80852</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2374.78</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>52643.18</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 120			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Elise for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELIZABETH MAY STERN</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		30		2016
M M	/	D D	/	Y Y Y Y								
06		30		2016								
Mailing Address 450 FORT HILL ROAD		Amount of Each Disbursement this Period <table border="1"> <tr> <td>2300.00</td> </tr> </table> <input type="checkbox"/> Memo Item <b>Transaction ID : SB20A.80803</b>	2300.00									
2300.00												
City SCARSDALE State NY Zip Code 10583	Purpose of Disbursement CONTRIBUTION REFUND- GENERAL											
Candidate Name	Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
Mailing Address		Amount of Each Disbursement this Period <table border="1"> <tr> <td></td> </tr> </table> <input type="checkbox"/> Memo Item										
City State Zip Code	Purpose of Disbursement											
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:												

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State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2300.00
<b>TOTAL</b> This Period (last page this line number only).....	2300.00