

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
05 MAY 11 AM 10:40

Office Use Only

1. NAME OF COMMITTEE (In Full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Tasini for New York

ADDRESS (number and street) **PO Box 302**
New York, NY 10040

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER **C00417162**
CITY STATE ZIP CODE
STATE DISTRICT
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

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

5. Covering Period 01 01 2006 through 03 31 2006

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 Barbara Caress
Signature of Treasurer Electronically Filed by Barbara Caress *B. Caress* Date 04 15 2006

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

25020313038

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Tasini for New York

Report Covering the Period: From: ^{M M} 0 1 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 6 To: ^{M M} 0 3 ^{D D} 3 1 ^{Y Y Y Y} 2 0 0 6

	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)).....	29534.05	53770.31
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	29534.05	53770.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	40131.39	48204.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40131.39	48204.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25565.81	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	33244.86	

For further information contact:

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

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

25020313039

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
Tasini for New York

Report Covering the Period: From: ^{M M} 0 1 ^{D D} 0 1 ^{Y Y Y Y} 2 0 0 6 To: ^{M M} 0 3 ^{D D} 3 1 ^{Y Y Y Y} 2 0 0 6

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17533.00	34083.00
(ii) Unitemized.....	12001.05	19687.31
(iii) TOTAL of contributions from Individuals..... ▶	29534.05	53770.31
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	29534.05	53770.31
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	20000.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	20000.00	20000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	49534.05	73770.31

25020313040

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40131.39	48204.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	40131.39	48204.50

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	16163.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	49534.05
25. SUBTOTAL (add Line 23 and Line 24).....	65697.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40131.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25565.81

25020313041

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

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

FOR LINE NUMBER: PAGE 5 / 41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)

Tasini for New York

A. Full Name (Last, First, Middle Initial) Rebecca Askew		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 6	
Mailing Address 1645 W Canal Court		Transaction ID: SA11A1.4706	
City Littleton	State CO	Zip Code 80120	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))	
Name of Employer Self	Occupation Attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 230.00		

B. Full Name (Last, First, Middle Initial) Rebecca Askew		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6	
Mailing Address 1645 W Canal Court		Transaction ID: SA11A1.4849	
City Littleton	State CO	Zip Code 80120	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))	
Name of Employer Self	Occupation Attorney		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 330.00		

C. Full Name (Last, First, Middle Initial) Naomi Baden		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 6	
Mailing Address 1833A Baltimore Annapolis Blvd		Transaction ID: SA11A1.4701	
City Annapolis	State MD	Zip Code 21409	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(441a-1))	
Name of Employer MCEA	Occupation Attorney / Trainer		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

26020313042

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

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

FOR LINE NUMBER: PAGE 6 / 41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Tasini for New York

Full Name (Last, First, Middle Initial) A. Peter Bernstein		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address One Park Avenue		Transaction ID: SA11A1.4808
City New York	State NY	Zip Code 10018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Segal	Occupation Benefits Consultant	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Donald Broder		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2006
Mailing Address 12000 Fredell Street		Transaction ID: SA11A1.4859
City Studio City	State CA	Zip Code 91604-4182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Kate Bronfenbrenner		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006
Mailing Address 207 Cobb Street		Transaction ID: SA11A1.4906
City Ithaca	State NY	Zip Code 14850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cornell University	Occupation Labor Educator	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

25020313042

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

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

FOR LINE NUMBER: PAGE 7 / 41

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Tasini for New York

Full Name (Last, First, Middle Initial) Ella Cohen		Date of Receipt MM / DD / YYYY 01 / 17 / 2008	
Mailing Address 100 Hudson Street 7B		Transaction ID: SA11A1.4563	
City New York	State NY	Zip Code 10013	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
Name of Employer Gap Co	Occupation Designer	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2008 X Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) Mary Ann Collins		Date of Receipt MM / DD / YYYY 02 / 01 / 2008	
Mailing Address 200 North Pickett Street #407		Transaction ID: SA11A1.4670	
City Alexandria	State VA	Zip Code 22304	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
Name of Employer SEIU	Occupation Manager	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2008 X Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) Judith DeLafeld		Date of Receipt MM / DD / YYYY 02 / 08 / 2008	
Mailing Address 679 1/2 Levering Avenue		Transaction ID: SA11A1.4684	
City Los Angeles	State CA	Zip Code 90024	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)	
Name of Employer Self	Occupation Physician	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2008 X Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

26020313044

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

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

FOR LINE NUMBER: PAGE 8 / 41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)

Tasini for New York

A. Full Name (Last, First, Middle Initial) Tiema Duncan		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2006	
Mailing Address 4445 Colbath Avenue Apt 309		Transaction ID: SA11A1.4619	
City Sherman Oaks	State CA	Zip Code 91423-9524	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))	
Name of Employer	Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Thomas Durst		Date of Receipt M M / D D / Y Y Y Y 01 / 06 / 2006	
Mailing Address PO Box 470		Transaction ID: SA11A1.4533	
City Ross	State CA	Zip Code 94957	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))	
Name of Employer	Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		

C. Full Name (Last, First, Middle Initial) Frances Fisher		Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2006	
Mailing Address 630 North Sepulveda Blvd # 906		Transaction ID: SA11A1.4678	
City El Segundo	State CA	Zip Code 90245	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))	
Name of Employer Self	Occupation Actress		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2650.00
TOTAL This Period (last page this line number only) ▶	

26020313045

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

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

FOR LINE NUMBER: PAGE 9 / 41

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Tasini for New York

A. Full Name (Last, First, Middle Initial) Wystan Getz Mailing Address 1218 Oakview Road City Decatur State GA Zip Code 30030 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 01 / 25 / 2006 Transaction ID: SA11A1.4657 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)
Name of Employer Self Occupation Attorney Election Cycle-to-Date ▼ 250.00	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Robert Greenwald Mailing Address 10510 Cutver Blvd City Culver City State GA Zip Code 30032 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 01 / 17 / 2006 Transaction ID: SA11A1.4556 Amount of Each Receipt this Period 500.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)
Name of Employer Occupation Election Cycle-to-Date ▼ 500.00	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Kurt Holm Mailing Address 7 Stonehurst Drive City Tenafly State NJ Zip Code 07670 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2006 Transaction ID: SA11A1.4726 Amount of Each Receipt this Period 250.00 Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)441a-1)
Name of Employer Xotarik Inc Occupation Consultant Election Cycle-to-Date ▼ 750.00	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

26020313046

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

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

FOR LINE NUMBER: PAGE 10/41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)

Tasini for New York

A. Daniel Hupert Full Name (Last, First, Middle Initial) Mailing Address 92 Mineola Avenue Box 847 City State Zip Code Point Lookout NY 11569		Date of Receipt M M / D D / Y Y Y Y 03 31 2006 Transaction ID: SA11A1.4947 Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)
Name of Employer Orzick & Hupert	Occupation Attorney Election Cycle-to-Date ▼ 225.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		

B. Gail Kinney Full Name (Last, First, Middle Initial) Mailing Address 321 Jones Hill Road City State Zip Code Canaan NH 03741		Date of Receipt M M / D D / Y Y Y Y 01 19 2006 Transaction ID: SA11A1.4587 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)
Name of Employer Self	Occupation Freelance Writer / Consultant Election Cycle-to-Date ▼ 250.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		

C. Gail Kinney Full Name (Last, First, Middle Initial) Mailing Address 321 Jones Hill Road City State Zip Code Canaan NH 03741		Date of Receipt M M / D D / Y Y Y Y 02 21 2006 Transaction ID: SA11A1.4710 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)1a-1)
Name of Employer Self	Occupation Freelance Writer / Consultant Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	

26020313047

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

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

FOR LINE NUMBER: PAGE 11 / 41

(check only one)

11a 11b 11c 11d
12 t3a t3b 14 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)

Tasini for New York

Full Name (Last, First, Middle Initial) A. Nancy Kricorian		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 44 Morningside Drive #31		Transaction ID: SA11A1.4741	
City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer Self	Occupation Writer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Ed Landing		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2006	
Mailing Address 125 Manning Blvd		Transaction ID: SA11A1.4766	
City Albany	State NY	Zip Code 12203	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer NYS	Occupation Paleontologist		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Otis Lee		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2006	
Mailing Address Main Street PO Box 319		Transaction ID: SA11A1.4994	
City Phoenicia	State NY	Zip Code 12464	Amount of Each Receipt this Period 208.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)41a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 208.00		

SUBTOTAL of Receipts This Page (optional) ▶	950.00
TOTAL This Period (last page this line number only) ▶	

25020313048

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

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

FOR LINE NUMBER: PAGE 12 / 41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)

Tasini for New York

<p>A. Full Name (Last, First, Middle Initial) Talgen Leighton</p>		<p>Date of Receipt M M J D O O / Y Y Y Y 03 14 2006</p>
<p>Mailing Address 2818 Russell Street</p>		<p>Transaction ID: SA11A1.4807</p>
<p>City Berkeley State CA Zip Code 94705</p>	<p>Amount of Each Receipt this Period 75.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)</p>
<p>Name of Employer Institute of Buddhist Studies</p>	<p>Occupation Teacher</p>	
<p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ 325.00</p>	

<p>B. Full Name (Last, First, Middle Initial) Talgen Leighton</p>		<p>Date of Receipt M M J D O O / Y Y Y Y 03 30 2006</p>
<p>Mailing Address 2818 Russell Street</p>		<p>Transaction ID: SA11A1.4924</p>
<p>City Berkeley State CA Zip Code 94705</p>	<p>Amount of Each Receipt this Period 50.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)</p>
<p>Name of Employer Institute of Buddhist Studies</p>	<p>Occupation Teacher</p>	
<p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ 375.00</p>	

<p>C. Full Name (Last, First, Middle Initial) Edward T Lantz</p>		<p>Date of Receipt M M J D O O / Y Y Y Y 03 31 2006</p>
<p>Mailing Address 230 Dockstader Road</p>		<p>Transaction ID: SA11A1.4997</p>
<p>City New Lisbon State NY Zip Code 13415</p>	<p>Amount of Each Receipt this Period 250.00</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)/441a-1)</p>
<p>Name of Employer Self</p>	<p>Occupation Attorney</p>	
<p>Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼</p>	<p>Election Cycle-to-Date ▼ 250.00</p>	

SUBTOTAL of Receipts This Page (optional) **375.00**

TOTAL This Period (last page this line number only)

26020313049

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

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

FOR LINE NUMBER: PAGE 13 / 41

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
	12		13a		13b		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)

Tasini for New York

A. Full Name (Last, First, Middle Initial) Bonnie Maslin Mailing Address 903 Park Avenue City New York State NY Zip Code 10021		Date of Receipt M N T D D / Y Y Y Y 03 29 2006 Transaction ID: SA11A1.497B Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)1a-1)
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) David Morris Mailing Address 2015 Irving Avenue S City Minneapolis State MN Zip Code 55405		Date of Receipt M N T D D / Y Y Y Y 03 13 2006 Transaction ID: SA11A1.4802 Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)1a-1)
Name of Employer Institute for Local Self-Reliance Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Writer Election Cycle-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Donna Nager Mailing Address 205 West End Avenue City New York State NY Zip Code 10023		Date of Receipt M N T D D / Y Y Y Y 02 02 2006 Transaction ID: SA11A1.4872 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)1a-1)
Name of Employer Self Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Public Health Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

26020313050

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

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

FOR LINE NUMBER: PAGE 14 / 41

(check only one)

11a. 11b. 11c. 11d.
 12. 13a. 13b. 14. 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)

Tasini for New York

Full Name (Last, First, Middle Initial) A. Donna Negar		Date of Receipt MM / DD / YYYY 03 / 15 / 2006
Mailing Address 205 West End Avenue		Transaction ID: SA11A1.4828
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Public Health	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Nathaniel Nerode		Date of Receipt MM / DD / YYYY 03 / 22 / 2006
Mailing Address 406 Cayuga Heights Road		Transaction ID: SA11A1.4828
City Ithaca	State NY	Zip Code 14850
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Cornell University	Occupation Programmer / Mathematician	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) C. Andrew Rotstein		Date of Receipt MM / DD / YYYY 03 / 15 / 2006
Mailing Address 535 Dean Street Apt 603		Transaction ID: SA11A1.4821
City Brooklyn	State NY	Zip Code 11217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

150131202025

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

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

FOR LINE NUMBER: PAGE 15 / 41

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)

Tasini for New York

Full Name (Last, First, Middle Initial) A. Thomas Beruppe Jr		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2006
Mailing Address 4 Wildberry Lane NE		Transaction ID: SA11A1.4918
City Iowa City	State IA	Zip Code 52240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer University of Iowa	Occupation Professor	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Jean Stein		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2006
Mailing Address 10 Gracie Square		Transaction ID: SA11A1.4712
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Eduardo Tarantelli		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2006
Mailing Address 161 Erie Lane		Transaction ID: SA11A1.4753
City Corning	State NY	Zip Code 14830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

SUBTOTAL of Receipts This Page (optional) **2050.00**

TOTAL This Period (last page this line number only)

26020313052

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

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

FOR LINE NUMBER: PAGE 16 / 41

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Tasini for New York

A. Rita Tasini

Full Name (Last, First, Middle Initial)
Mailing Address 205 West End Avenue Apt 27C

City New York	State NY	Zip Code 10023
------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
--	-------------------------------------

Date of Receipt: MM / DD / YYYY
01 / 14 / 2008

Transaction ID: SA11A1.4552

Amount of Each Receipt this Period: 1000.00

Receipt: Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))

B. Martin Widzer

Full Name (Last, First, Middle Initial)
Mailing Address 1352 Roscomare Road

City Los Angeles	State CA	Zip Code 90077
---------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1050.00
--	-------------------------------------

Date of Receipt: MM / DD / YYYY
01 / 22 / 2008

Transaction ID: SA11A1.4824

Amount of Each Receipt this Period: 1000.00

Receipt: Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))

C. Mercy Winograd

Full Name (Last, First, Middle Initial)
Mailing Address 854 Fiske Street

City Pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
--	------------------------------------

Date of Receipt: MM / DD / YYYY
01 / 22 / 2008

Transaction ID: SA11A1.4597

Amount of Each Receipt this Period: 250.00

Receipt: Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

26020313053

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

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

FOR LINE NUMBER: PAGE 17 / 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
Tasini for New York

Full Name (Last, First, Middle Initial) A. Mercy Winograd		Date of Receipt MM / DD / YYYY 01 / 22 / 2006
Mailing Address 954 Fiske Street		Transaction ID: SA11A1.4600
City Pacific Palisades	State CA	Zip Code 90272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Tami Winograd		Date of Receipt MM / DD / YYYY 01 / 27 / 2006
Mailing Address 608 North Rodeo Drive		Transaction ID: SA11A1.4661
City Beverly Hills	State CA	Zip Code 90210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Richard Wood		Date of Receipt MM / DD / YYYY 03 / 06 / 2006
Mailing Address 1419 1/2 Stanford Drive		Transaction ID: SA11A1.4752
City Glendale	State CA	Zip Code 91205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Helmberg & Zohar LLP	Occupation Attorney	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(1)-(1))
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	2150.00
TOTAL This Period (last page this line number only)	17533.00

26020313054

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

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

FOR LINE NUMBER:		PAGE 18 / 41	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
Tasini for New York

Full Name (Last, First, Middle Initial) A. Jonathan Tasini		Date of Receipt M N / D D / Y Y Y Y 03 / 31 / 2008	
Mailing Address PO Box 302		Transaction ID: SA13A.5058	
City New York	State NY	Zip Code 10040	Amount of Each Receipt (this Period) 20000.00
FEC ID number of contributing federal political committee. C		Candidate Loan Limit increased due to Opponent's Spending (2 U.S.C. 441a(j)(441a-1))	
Name of Employer	Occupation		
Receipt For: 2008 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 20000.00		

SUBTOTAL of Receipts This Page (optional)	▶	20000.00
TOTAL This Period (last page this line number only)	▶	20000.00

26020313055

**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 19/41

17 18 19a 19b
20a 20b 20c 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)

Tasini for New York

Full Name (Last, First, Middle-Initial) A. Marlin Adams		Transaction ID: SB17.5002 Date of Disbursement M M J D D Y Y Y 0 1 2 0 2 0 0 6	
Mailing Address		Amount of Each Disbursement this Period 2100.00	
City State Zip Code	Purpose of Disbursement Political Consulting Services Candidate Name Category/Type		
Office Sought: House Senate President State: District	Disbursement For: 2008 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle-Initial) B. Advomatic LLC		Transaction ID: SB17.5010 Date of Disbursement M M J D D Y Y Y 0 1 2 0 2 0 0 6	
Mailing Address 15 West 28th Street		Amount of Each Disbursement this Period 3993.75	
City State Zip Code	Purpose of Disbursement Internet Services Candidate Name Category/Type		
Office Sought: House Senate President State: District	Disbursement For: 2008 X Primary General Other (specify) ▼		

Full Name (Last, First, Middle-Initial) C. Advomatic LLC		Transaction ID: SB17.5021 Date of Disbursement M M J D D Y Y Y 0 3 1 0 2 0 0 6	
Mailing Address 15 West 28th Street		Amount of Each Disbursement this Period 375.00	
City State Zip Code	Purpose of Disbursement Internet Services Candidate Name Category/Type		
Office Sought: House Senate President State: District	Disbursement For: 2008 X Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	6468.75
TOTAL This Period (last page this line number only)	

26020313056

**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 20 / 41

17 18 19a 19b
20a 20b 20c 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)
Teasini for New York

Full Name (Last, First, Middle Initial) A. Astoria Graphics		Transaction ID: SB17.4997 Date of Disbursement 01 02 2006	
Mailing Address 225 Varick Street		Amount of Each Disbursement this Period 1889.47	
City New York	State NY	Zip Code 10014	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Printing Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2008 X Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Astoria Graphics		Transaction ID: SB17.5025 Date of Disbursement 03 27 2006	
Mailing Address 225 Varick Street		Amount of Each Disbursement this Period 2010.36	
City New York	State NY	Zip Code 10014	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Printing Services		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2008 X Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Auburn-Quad Inc		Transaction ID: SB17.5054 Date of Disbursement 03 12 2006	
Mailing Address PO Box 390728		Amount of Each Disbursement this Period 19.03	
City Cambridge	State MA	Zip Code 02139	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Processing Fees		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2008 X Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3890.86
TOTAL This Period (last page this line number only)	

26020313057

**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 21 / 41

17 18 19a 19b
20a 20b 20c 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)

TasInI for New York

Full Name (Last, First, Middle Initial): A. Auburn Quad Inc		Transaction ID: SB17.5055 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2008	
Mailing Address PO Box 390728		Amount of Each Disbursement this Period 36.60	
City Cambridge State MA Zip Code 02139	Purpose of Disbursement Processing Fees Candidate Name	Category/ Type	
Office Sought: House Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District			

Full Name (Last, First, Middle Initial): B. Auburn Quad Inc		Transaction ID: SB17.5056 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2008	
Mailing Address PO Box 390728		Amount of Each Disbursement this Period 328.75	
City Cambridge State MA Zip Code 02139	Purpose of Disbursement Processing Fees Candidate Name	Category/ Type	
Office Sought: House Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District			

Full Name (Last, First, Middle Initial): C. Auburn Quad Inc		Transaction ID: SB17.5057 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2008	
Mailing Address PO Box 390728		Amount of Each Disbursement this Period 112.13	
City Cambridge State MA Zip Code 02139	Purpose of Disbursement Processing Fees Candidate Name	Category/ Type	
Office Sought: House Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District			

SUBTOTAL of Disbursements This Page (optional) **477.48**

TOTAL This Period (last page this line number only)

25020313058

**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 22 / 41

17 19 19a 19b
20a 20b 20c 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)

Tasini for New York

Full Name (Last, First, Middle Initial)

A. R J Bee

Mailing Address 1717 U Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Research Consulting Services
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District
Disbursement For: 2008
 Primary General
Other (specify) ▼

Transaction ID: SB17.5008
Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2008

Amount of Each Disbursement this Period

900.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Elise Bernhardt

Mailing Address 23 Douglass Street

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Fundraising Services
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District
Disbursement For: 2008
 Primary General
Other (specify) ▼

Transaction ID: SB17.5004
Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Elise Bernhardt

Mailing Address 23 Douglass Street

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Fundraising Expenses
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District
Disbursement For: 2008
 Primary General
Other (specify) ▼

Transaction ID: SB17.5005
Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2008

Amount of Each Disbursement this Period

80.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1980.60

TOTAL This Period (last page this line number only)

26020313059

**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 23 / 41

17 18 19a 19b
20a 20b 20c 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)

Tasini for New York

A. Full Name (Last, First, Middle Initial)
Maceo Brown

Transaction ID: SB17.5027
Date of Disbursement

M M / D D / Y Y Y Y
02 / 24 / 2006

Mailing Address 23 Clara Street

City State Zip Code
Brooklyn NY 11218

Amount of Each Disbursement this Period

653.72

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
State: District: Disbursement For: 2006
 Primary General
Other (specify) ▼

B. Full Name (Last, First, Middle Initial)
Maceo Brown

Transaction ID: SB17.5034
Date of Disbursement

M M / D D / Y Y Y Y
03 / 10 / 2006

Mailing Address 23 Clara Street

City State Zip Code
Brooklyn NY 11218

Amount of Each Disbursement this Period

1107.00

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
State: District: Disbursement For: 2006
 Primary General
Other (specify) ▼

C. Full Name (Last, First, Middle Initial)
Maceo Brown

Transaction ID: SB17.5038
Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2006

Mailing Address 23 Clara Street

City State Zip Code
Brooklyn NY 11218

Amount of Each Disbursement this Period

1107.00

Purpose of Disbursement

Salary

Candidate Name

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House Senate President
State: District: Disbursement For: 2006
 Primary General
Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2877.72

TOTAL This Period (last page this line number only)

26020313060

**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 24 / 41

17 20a 18 20b 18a 20c 18b 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)
Tasini for New York

A. Full Name (Last, First, Middle Initial) Brian Fairbanks		Transaction ID: SB17.5029 Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2006	
Mailing Address 351 Washington Avenue		Amount of Each Disbursement this Period 650.23	
City Brooklyn State NY Zip Code 11238	Purpose of Disbursement Salary Candidate Name		
Office Sought: House Senate President State: District		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
Category/Type		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

B. Full Name (Last, First, Middle Initial) Brian Fairbanks		Transaction ID: SB17.5035 Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 351 Washington Avenue		Amount of Each Disbursement this Period 900.93	
City Brooklyn State NY Zip Code 11238	Purpose of Disbursement Salary Candidate Name		
Office Sought: House Senate President State: District		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
Category/Type		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

C. Full Name (Last, First, Middle Initial) Brian Fairbanks		Transaction ID: SB17.5039 Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 351 Washington Avenue		Amount of Each Disbursement this Period 900.93	
City Brooklyn State NY Zip Code 11238	Purpose of Disbursement Salary Candidate Name		
Office Sought: House Senate President State: District		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	
Category/Type		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional)	2460.09
TOTAL This Period (last page this line number only)	

25020313061

**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 25 / 41

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	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)
Tesini for New York

Full Name (Last, First, Middle Initial)

A. Theodore Hamm

Mailing Address 43 Withers Street

City State Zip Code
Brooklyn NY 11211

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
X Primary General
Other (specify) ▼
State: District

Transaction ID: SB17.4999
Date of Disbursement

01 / 02 / 2006

Amount of Each Disbursement this Period

2480.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Theodore Hamm

Mailing Address 43 Withers Street

City State Zip Code
Brooklyn NY 11211

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
X Primary General
Other (specify) ▼
State: District

Transaction ID: SB17.5006
Date of Disbursement

01 / 28 / 2006

Amount of Each Disbursement this Period

3750.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Theodore Hamm

Mailing Address 43 Withers Street

City State Zip Code
Brooklyn NY 11211

Purpose of Disbursement
Political Consulting Services

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
X Primary General
Other (specify) ▼
State: District

Transaction ID: SB17.5011
Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

1475.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7705.00

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

25020313052

**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 26 / 41

17 20a 18 20b 18a 20c 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)
Tasiri for New York

A. Full Name (Last, First, Middle Initial) Lea Kiefer		Transaction ID: SB17.5017	
Mailing Address 60 Skillman Avenue #1R		Date of Disbursement 02 / 10 / 2006	
City Brooklyn	State NY	Zip Code 11211	Amount of Each Disbursement this Period 998.17
Purpose of Disbursement Salary		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼		
State: District:			

B. Full Name (Last, First, Middle Initial) Lea Kiefer		Transaction ID: SB17.5030	
Mailing Address 60 Skillman Avenue #1R		Date of Disbursement 02 / 24 / 2006	
City Brooklyn	State NY	Zip Code 11211	Amount of Each Disbursement this Period 499.08
Purpose of Disbursement Salary		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼		
State: District:			

C. Full Name (Last, First, Middle Initial) Adam Koch		Transaction ID: SB17.5036	
Mailing Address 243 East 13th Street Apt 14		Date of Disbursement 03 / 10 / 2006	
City New York	State NY	Zip Code 10003	Amount of Each Disbursement this Period 1180.10
Purpose of Disbursement Salary		Category/ Type	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2677.35
TOTAL This Period (last page this line number only)	

26020313063

**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 27 / 41

17
20a 18
20b 19a
20c 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)
Tasini for New York

A. Adam Koch

Full Name (Last, First, Middle Initial): Adam Koch

Transaction ID: SB17.5023
Date of Disbursement: 03 21 2006

Mailing Address: 243 East 13th Street Apt 14

City: New York State: NY Zip Code: 10003

Purpose of Disbursement: Expense Reimbursement

Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: 2006
X Primary General Other (specify) ▼

Amount of Each Disbursement this Period: 277.44

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Adam Koch

Full Name (Last, First, Middle Initial): Adam Koch

Transaction ID: SB17.5024
Date of Disbursement: 03 22 2006

Mailing Address: 243 East 13th Street Apt 14

City: New York State: NY Zip Code: 10003

Purpose of Disbursement: Expense Reimbursement

Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: 2006
X Primary General Other (specify) ▼

Amount of Each Disbursement this Period: 190.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Adam Koch

Full Name (Last, First, Middle Initial): Adam Koch

Transaction ID: SB17.5040
Date of Disbursement: 03 24 2006

Mailing Address: 243 East 13th Street Apt 14

City: New York State: NY Zip Code: 10003

Purpose of Disbursement: Salary

Candidate Name:

Office Sought: House Senate President
State: District: Disbursement For: 2006
X Primary General Other (specify) ▼

Amount of Each Disbursement this Period: 1180.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1647.54
TOTAL This Period (last page this line number only)	

26020313064

**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 28 / 41

17 18 19a 19b
20a 20b 20c 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)
Tasini for New York

Full Name (Last, First, Middle Initial)

A. Paychex

Transaction ID: SB17.5033

Date of Disbursement

Mailing Address 911 Panorama Trail South

02 / 24 / 2008

City Rochester State NY Zip Code 14625

Amount of Each Disbursement this Period

Purpose of Disbursement

2986.13

Payroll Taxes

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Category/
Type

Office Sought: House
Senate
President

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

State: District

Full Name (Last, First, Middle Initial)

B. Paychex

Transaction ID: SB17.5037

Date of Disbursement

Mailing Address 911 Panorama Trail South

03 / 10 / 2008

City Rochester State NY Zip Code 14625

Amount of Each Disbursement this Period

Purpose of Disbursement

1238.15

Payroll Taxes

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Category/
Type

Office Sought: House
Senate
President

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

State: District

Full Name (Last, First, Middle Initial)

C. Paychex

Transaction ID: SB17.5041

Date of Disbursement

Mailing Address 911 Panorama Trail South

03 / 24 / 2008

City Rochester State NY Zip Code 14625

Amount of Each Disbursement this Period

Purpose of Disbursement

1238.15

Payroll Taxes

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Category/
Type

Office Sought: House
Senate
President

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

State: District

SUBTOTAL of Disbursements This Page (optional)

5362.43

TOTAL This Period (last page this line number only)

25020313065

**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 29 / 41

17
20a 18
20b 19a
20c 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)
TaskInI for New York

Full Name (Last, First, Middle Initial) A. Liese Schneider		Transaction ID: SB17.5015 Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2006	
Mailing Address 403 St John's Place Apt 1E		Amount of Each Disbursement this Period 695.07	
City Brooklyn	State NY	Zip Code 11238	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.59
Purpose of Disbursement Expense Reimbursement		Category/ Type	
Candidate Name -			
Office Sought: House Senate President	Disbursement For: 2006 X - Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Liese Schneider		Transaction ID: SB17.5018 Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2006	
Mailing Address 403 St John's Place Apt 1E		Amount of Each Disbursement this Period 1406.28	
City Brooklyn	State NY	Zip Code 11238	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.59
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Liese Schneider		Transaction ID: SB17.5031 Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2006	
Mailing Address 403 St John's Place Apt 1E		Amount of Each Disbursement this Period 1406.28	
City Brooklyn	State NY	Zip Code 11238	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.59
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: 2006 X Primary General Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3507.63
TOTAL This Period (last page this line number only)	

26020313066

**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 30 / 41

17 20a 18 20b 19a 20c 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)
Tasini for New York

Full Name (Last, First, Middle Initial) A. Alexandra Schultz		Transaction ID: SB17.5001 Date of Disbursement: 01 / 02 / 2006	
Mailing Address: 164 Madison		Amount of Each Disbursement This Period 548.78	
City: Brooklyn State: NY Zip Code: 11216	Category/ Type		
Purpose of Disbursement: Clerical Services Candidate Name:		Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: House Senate President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	548.78
TOTAL This Period (last page this line number only)	39612.21

26020313067

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one) 13a. 13b.

NAME OF COMMITTEE (In Full)

Tasini for New York

Transaction ID: SC/10,5058

LOAN SOURCE Full Name (Last, First, Middle Initial) Jonathan Tasini, - Personal funds-	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ♥
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
M M D D Y Y Y Y	03 31 2006	On Demand	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	20000.00
TOTALS This Period (last page in this line only)	20000.00

Carry outstanding balance only to LINE 2, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

26020313068

SCHEDULE D (FEC Form 3)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Web-Site Development	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period 1700.00		Transaction ID: SD10.4488	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Photography Services	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period 600.00		Transaction ID: SD10.4489	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Travel Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period 63.00		Transaction ID: SD10.4506	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 63.00	

1) SUBTOTALS This Period This Page (optional).....	▶	2353.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

26020313069

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 9 10

Excluding Loans

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Travel Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period		Transaction ID: SD10.4507	
80.15			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	80.15	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Travel Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period		Transaction ID: SD10.4508	
43.35			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	43.35	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Web-Site Development	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	
Outstanding Balance Beginning This Period		Transaction ID: SD10.4509	
1000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1000.00	

1) SUBTOTALS This Period-This Page (optional):.....	▶	1123.50
2) TOTALS This Period (last page this line number only):.....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only):.....	▶	
4) ADD 2), and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

26020313070

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 9 10

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini			Nature of Debt (Purpose): Advance - Delivery Services
Mailing Address PO Box 302			
City New York	State NY	ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4509		
22.54			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	22.54	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini			Nature of Debt (Purpose): Advance - Filing Fees
Mailing Address PO Box 302			
City New York	State NY	ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4504		
117.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	117.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini			Nature of Debt (Purpose): Advance - Research Materials
Mailing Address PO Box 302			
City New York	State NY	ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4509		
35.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	35.00	

1) SUBTOTALS This Period This Page (optional):	174.54
2) TOTALS This Period (last page this line number only):	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only):	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only):	

26020313071

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

Excluding Loans

NAME OF COMMITTEE (In Full)
Tagini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Site Rental
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4510		
400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	400.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Insurance Expense
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4505		
617.98			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	617.98	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Delivery Services
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4511		
23.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	23.30	

1) SUBTOTALS This Period This Page (optional):.....	1041.28
2) TOTALS This Period (last page this line number only):.....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only):.....	
4) ADD 2), and 3) and carry forward to appropriate line of Summary Page (last page only)	

26020313072

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period 581.40	Transaction ID: SD10.4512		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 581.40	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Office Expenses
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period 105.67	Transaction ID: SD10.4513		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 105.67	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City New York State NY ZIP Code 10040	

Outstanding Balance Beginning This Period 34.65	Transaction ID: SD10.4514		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 34.65	

1) SUBTOTALS This Period This Page (optional).....	721.72
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) , and carry forward to appropriate line of Summary Page (last page only).	

26020313073

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 37 / 41
 FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)
 Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Site Rental
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	
Outstanding Balance Beginning This Period Transaction ID: SD10.4515 <div style="text-align: center;">1543.26</div>	
Amount Incurred This Period <div style="text-align: center;">0.00</div>	Payment This Period Outstanding Balance at Close of This Period <div style="text-align: center;">0.00</div> <div style="text-align: right;">1543.26</div>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	
Outstanding Balance Beginning This Period Transaction ID: SD10.4517 <div style="text-align: center;">57.60</div>	
Amount Incurred This Period <div style="text-align: center;">0.00</div>	Payment This Period Outstanding Balance at Close of This Period <div style="text-align: center;">0.00</div> <div style="text-align: right;">57.60</div>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	
Outstanding Balance Beginning This Period Transaction ID: SD10.4516 <div style="text-align: center;">115.33</div>	
Amount Incurred This Period <div style="text-align: center;">0.00</div>	Payment This Period Outstanding Balance at Close of This Period <div style="text-align: center;">0.00</div> <div style="text-align: right;">115.33</div>

1) SUBTOTALS This Period This Page (optional).....	1716.19
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2), and 3), and carry forward to appropriate line of Summary Page (last page only)	

26020313074

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:
(check only one) 9
 10

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4518		
22.83			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	22.83	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Travel Expenses
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4519		
111.87			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	111.87	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini	Nature of Debt (Purpose): Advance - Office Supplies
Mailing Address PO Box 302	
City State ZIP Code New York NY 10040	

Outstanding Balance Beginning This Period	Transaction ID: SD10.4520		
238.41			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	238.41	

1) SUBTOTALS This Period This Page (optional):.....	373.11
2) TOTALS This Period (last page this line number only):.....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only):.....	
4) ADD 2), and 3) and carry forward to appropriate line of Summary Page (last page only)	

26020313075

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Tasini for New York

(Use separate
schedule(s)
for each
numbered line)

PAGE 39 / 41

FOR LINE NUMBER:
(check only one) 9
 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Office Supplies	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 97.52		Transaction ID: SD10.4521	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 97.52	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Travel Expenses	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 805.00		Transaction ID: SD10.4522	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 805.00	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Meeting Expense	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.5059	
Amount Incurred This Period 1091.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1091.00	

1) SUBTOTALS This Period This Page (optional):.....	1993.52
2) TOTALS This Period (last page this line number only):.....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only):.....	
4) ADD 2), and 3), and carry forward to appropriate line of Summary Page (last page only)	

26020313076

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered fine)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Office Expenses	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.5060	
Amount Incurred This Period 107.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 107.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Postage Expenses	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.5061	
Amount Incurred This Period 312.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 312.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Printing Expenses	
Mailing Address PO Box 302			
City State New York NY	ZIP Code 10040		
Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.5062	
Amount Incurred This Period 1780.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1780.00	

1) SUBTOTALS This Period This Page (optional).....	2199.00
2) TOTALS This Period (last page this line number only).....	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

26020313077

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Tasini for New York

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Staff Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5063	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
65.00	0.00	65.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Telecommunications Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5064	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
388.00	0.00	388.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jonathan Tasini		Nature of Debt (Purpose): Advance - Travel Expenses	
Mailing Address PO Box 302			
City	State	ZIP Code	
New York	NY	10040	

Outstanding Balance Beginning This Period		Transaction ID: SD10.5085	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1086.00	0.00	1086.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1539.00
2) TOTALS This Period (last page this line number only).....	▶	13244.88
3) TOTALS OUTSTANDING LOANS ¹ from Schedule C (last page only).....	▶	
4) ADD 2) and 3), and carry forward to appropriate line of Summary Page (last page only)	▶	

26020313078

Flat Rate Envelope

Flat Rate postage regardless of weight, destination or type of mailable material enclosed. Domestic use of:

Print Postage Online - Go to www.usps.com/postageonline

Recycled Paper PLEASE PRESS FIRMLY

PLEASE PRESS AT POINTS INDICATED TO ENSURE THE PROPER SEALING OF THE ENVELOPE TO PREVENT LOSS OF CONTENTS. ADDRESS FOR POSTAGE ONLY. **CERTIFIED MAIL**

PLEASE PRESS FIRMLY



U.S. POSTAGE
PAID
NEW YORK NY
APR 15 2008
PERMIT
\$8.30
0005691E-12

PRIORITY MAIL

UNITED STATES POSTAL SERVICE



7005 1820 0004 2680 2476

TO USE:

- 1. COMPLETE ADDRESS AREA**
Type or print return address and addressee information in designated area or on label.
- 2. PAYMENT METHOD**
Affix postage or meter strip to area indicated in upper right hand corner.
- 3. ATTACH LABEL** (Optional)
Remove label backing and affix to designated location.

4. Bring your Priority Mail package to a post office, present it to your letter carrier, or call 1-800-225-1911 for pick up service. Stamped mail may be deposited in a collection box ONLY if it weighs less



EMPTY

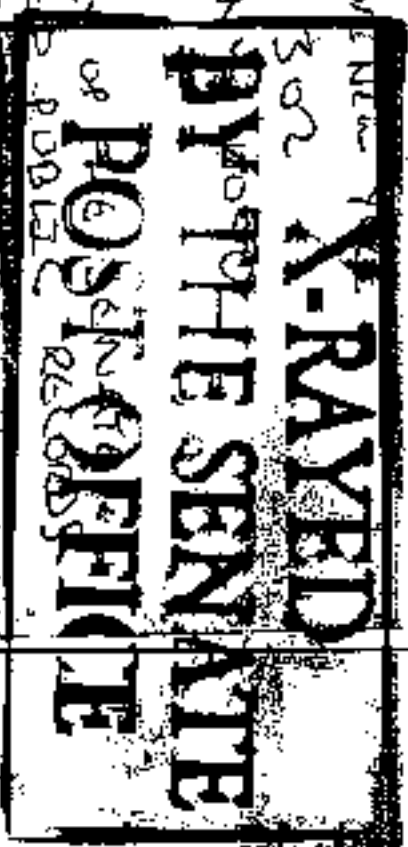
www.usps.com

SECRETARY OF THE SENATE
06 MAY 11 AM 10:42

FROM:

TASINI CORP
P.O. BOX
New York, NY

TO: SECRETARY OF THE SENATE
OFFICE OF PUBLIC RELATIONS
P.O. Box 302
ALEXANDRIA, VA 22301-0104



FORM 3826 JUN 2002

The convenient Flat Rate Envelope

RETURN RECEIPT REQUESTED
67021307092

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

04-15-06

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

05-11-06

26020313080



26020313081

18051502092