

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

New York State Conservative Party

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="983.14"/>	<input type="text" value="983.14"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1191.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11730.00"/>	<input type="text" value="13730.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="12921.90"/>	<input type="text" value="14713.14"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7252.18"/>	<input type="text" value="9043.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5669.72"/>	<input type="text" value="5669.72"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

New York State Conservative Party

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2250.00	2250.00
(ii) Unitemized	4480.00	4480.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6730.00	6730.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11730.00	13730.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11730.00	13730.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11730.00	13730.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	32.50	72.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	32.50	72.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditures (use Schedule E)	4719.68	6428.42
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	42.50
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7252.18	9043.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7252.18	9043.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11730.00	13730.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11730.00	13730.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32.50	72.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32.50	72.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
New York State Conservative Party

Full Name (Last, First, Middle Initial) A. Arslan Cekiq		Date of Receipt 07 / 21 / 2011 Transaction ID : SA11AI.45712
Mailing Address 210 Dahill Road 2B		Amount of Each Receipt this Period 500.00
City Brooklyn	State NY	Zip Code 11218
FEC ID number of contributing federal political committee. C		Dinner Cont.
Name of Employer self-employed	Occupation real estate owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Matthew A. Doheny		Date of Receipt 07 / 26 / 2011 Transaction ID : SA11AI.45819
Mailing Address 303 Paddock Street		Amount of Each Receipt this Period 1500.00
City Watertown	State NY	Zip Code 13601
FEC ID number of contributing federal political committee. C		Imm Surv.
Name of Employer Fintech Advisory	Occupation Financial Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. George J. Liebner		Date of Receipt 07 / 25 / 2011 Transaction ID : SA11AI.45755
Mailing Address 295 Starling Ct.		Amount of Each Receipt this Period 250.00
City Manhasset	State NY	Zip Code 11030
FEC ID number of contributing federal political committee. C		Imm. Sur.
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New York State Conservative Party

Full Name (Last, First, Middle Initial)
A. PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH (PETE PAC)

Mailing Address 7804 EVENING LANE

City ALEXANDRIA State VA Zip Code 22306

FEC ID number of contributing federal political committee. **C** C00363770

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2011

Transaction ID : SA11C.45690

Amount of Each Receipt this Period
5000.00

Contribution

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
New York State Conservative Party

Full Name (Last, First, Middle Initial)

A. BOB TURNER FOR CONGRESS

Mailing Address 78-81 81ST STREET

City State Zip Code
GLENDALE NY 11385

Purpose of Disbursement
Contribution

011

Candidate Name

BOB TURNER FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 09

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Special-General

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2011

Transaction ID : SB23.45892

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BOB TURNER FOR CONGRESS

Mailing Address 78-81 81ST STREET

City State Zip Code
GLENDALE NY 11385

Purpose of Disbursement
contribution

011

Candidate Name

BOB TURNER FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 09

Disbursement For: 2011
 Primary General
 Other (specify) ▼
Special-General

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2011

Transaction ID : SB23.45894

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Doug Hoffman

Mailing Address 111 River Street

City State Zip Code
Saranac Lake NY 12983

Purpose of Disbursement
donation

012

Candidate Name

DOUG HOFFMAN FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2011

Transaction ID : SB23.45893

Amount of Each Disbursement this Period

1500.00

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

2500.00

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

2500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

NAME OF COMMITTEE (In Full)
New York State Conservative Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Majority Strategies	Nature of Debt (Purpose): postage and printing
Mailing Address 135 Professional Drive	
City State Zip Code Ponte Vedra FL 32082	

Outstanding Balance Beginning This Period <input type="text" value="4719.68"/>	Transaction ID : SD10.45940	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4719.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New York State Conservative Party	FEC IDENTIFICATION NUMBER ▼ C C00282343
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2011
Mailing Address 135 Professional Drive		Amount 4719.68
City Ponte Vedra	State FL	
Zip Code 32082	Transaction ID : SE.45943	
Purpose of Expenditure postage and printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>26</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JANE CORWIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6428.42		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee		Date M M M / D D D / Y Y Y Y Y Y
Mailing Address		Amount
City	State	
Zip Code	Transaction ID : SE.45943	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	4719.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	4719.68

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

Mr. Gerard J Kassar

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 / 25 / 2012