

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Espailat for Congress 2018

ADDRESS (number and street)

P.O. Box H

Check if different than previously reported. (ACC)

New York

NY

10034

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00635722

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

NY

13

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

06 /

26 /

2018

in the State of

NY

(c) 30-Day **POST**-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

/

/

/

in the State of

/

5. Covering Period

04 /

01 /

2018

through

06 /

06 /

2018

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

Castillo, Raysa, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Castillo, Raysa, , ,

[Electronically Filed]

Date

06 /

14 /

2018

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Espallat for Congress 2018**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	44064.99	510671.44
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2803.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	44064.99	507868.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	57320.68	211371.15
(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)).....	57320.68	211371.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	284342.80	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Espailat for Congress 2018

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

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).....	31200.00	271381.80
(ii) Unitemized.....	1614.99	11139.64
(iii) TOTAL of contributions from individuals ▶	32814.99	282521.44
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11250.00	228150.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	44064.99	510671.44
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	1548.01
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	44064.99	512219.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 61

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	57320.68	211371.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	8000.00	8000.00
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	503.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2300.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2803.00
21. OTHER DISBURSEMENTS .....	3700.00	5700.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	69020.68	227874.15

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	309298.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	44064.99
25. SUBTOTAL (add Line 23 and Line 24).....	353363.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69020.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	284342.80

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

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

FOR LINE NUMBER: PAGE 5 OF 61  
(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)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Adams, Eric, L, ,**  
 Mailing Address 425 Prospect Pl  
 Apt 1K  
 City Brooklyn State NY Zip Code 11238-4107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer City Of New York Occupation Brooklyn Borough President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2018  
**Transaction ID : VNJ3JH74EW5**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Aguillen, Amador Dean, , ,**  
 Mailing Address PO Box 15506  
 City Washington State DC Zip Code 20003-0506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Oglivy Government Relations Occupation Senior Vice President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2018  
**Transaction ID : VNJ3JHA2D10**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Alvarez, Hector, , ,**  
 Mailing Address 2154 Bruckner Blvd  
 City Bronx State NY Zip Code 10473-1301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Somos Community Care Occupation Team Leader  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2018  
**Transaction ID : VNJ3JH42JG8**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 6 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Carrasco, Lilian, I., ,**  
 Mailing Address 2154 Bruckner Blvd  
 City Bronx State NY Zip Code 10473-1301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Corinthian Medical IPA Inc. Administrator  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2018  
**Transaction ID : VNJ3JH42JF0**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Collado, Samuel, , ,**  
 Mailing Address 1404 Michael Pl # 1F  
 City Bayside State NY Zip Code 11360-1150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Key Food CEO  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : VNJ3JH42P50**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Corona, Luis, , ,**  
 Mailing Address 10 Evergreen Way  
 City Glen Head State NY Zip Code 11545-2542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 117 Corona Meat Corp. Supermarket Owner  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : VNJ3JH42N17**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

2500.00

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

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

FOR LINE NUMBER: PAGE 7 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Damiron, Alexandro, A., ,**

Mailing Address 3102 Kingsbridge Ave  
Apt 4E

City Bronx State NY Zip Code 10463-3909

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

Name of Employer Mount Sinai Hospital Occupation Manager, Health System Development

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 12 / 2018

Transaction ID : **VNJ3JH42JC6**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Diaz, Arcadio, , ,**

Mailing Address 98 N Cambridge St

City Malverne State NY Zip Code 11565-2152

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

Name of Employer Sarman Food Corp. Occupation Chairman And CEO

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : **VNJ3JH42MR6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Diaz, Luis, M., ,**

Mailing Address 29 Birchwood Dr

City Woodcliff Lake State NJ Zip Code 07677-7801

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

Name of Employer C-Town Supermarket Occupation Storeowner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : **VNJ3JH42MX6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Diaz, Mariano, , ,**

Mailing Address 1600 Parker Ave  
Apt 30G

City Fort Lee State NJ Zip Code 07024-7009

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

Name of Employer C-Town Supermarket Occupation Storeowner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : **VNJ3JH42MC2**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Espinal, Mart?n, A., ,**

Mailing Address 67 Royal Way

City Manhasset Hills State NY Zip Code 11040-1230

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

Name of Employer Associated Food Stores, Inc. Occupation President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : **VNJ3JH42MT2**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Fernandez, Candido, P., ,**

Mailing Address 3 Regina Ln

City Glen Head State NY Zip Code 11545-2717

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

Name of Employer Union Market Corp. Occupation Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

Transaction ID : **VNJ3JH42MJ9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Friedman, William, S., ,**

Mailing Address 320 Central Park W  
Apt 18B

City New York State NY Zip Code 10025-7659

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

Name of Employer Beachwold Partners LP Occupation Property Management

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2018

Transaction ID : **VNJ3JH1M4Q1**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Friedman, William, S., ,**

Mailing Address 320 Central Park W  
Apt 18B

City New York State NY Zip Code 10025-7659

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

Name of Employer Beachwold Partners LP Occupation Property Management

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2018

Transaction ID : **VNJ3JH6F3X5**

Amount of Each Receipt this Period  
 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Fuertes, Rodolfo, , ,**

Mailing Address 1 Valentine Farm Ct

City Glen Head State NY Zip Code 11545-2539

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

Name of Employer Fine Fare Supermarket Occupation Storeowner

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : **VNJ3JH42N33**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2200.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Goico, Pedro, , ,**  
 Mailing Address 4531 Browvale Ln  
 City Little Neck State NY Zip Code 11362-1305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Skylight Holdings Inc. Occupation President  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2018  
**Transaction ID : VNJ3JHAFH05**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Guzman, Juan, J., ,**  
 Mailing Address 6021 Hewlett St  
 City Little Neck State NY Zip Code 11362-2527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Key Food Supermarket Occupation Storeowner  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : VNJ3JH42N00**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jorge, Francisco, , ,**  
 Mailing Address 2 Drake St  
 City Malverne State NY Zip Code 11565-1505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Jorgu Meat Corporation Occupation Business Manager  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018  
**Transaction ID : VNJ3JH42M98**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Liriano, Cesar, F, ,**

Mailing Address 118 N 10Th St

City Lebanon	State PA	Zip Code 17046-4917
-----------------	-------------	------------------------

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

Name of Employer Lebanon Travel	Occupation Owner
------------------------------------	---------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 17 / 2018

**Transaction ID : VNJ3JH3YB22**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Luna, Miguel, , ,**

Mailing Address 9 Pelican Ct

City Paramus	State NJ	Zip Code 07652-4336
-----------------	-------------	------------------------

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

Name of Employer Fine Fare Supermarket	Occupation Supermarket Owner
-------------------------------------------	---------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018

**Transaction ID : VNJ3JH42M64**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Martinez, Franklin, , ,**

Mailing Address 2100 Linwood Ave  
Apt 160

City Fort Lee	State NJ	Zip Code 07024-3154
------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 10 / 2018

**Transaction ID : VNJ3JH3D7A3**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**McCormack, Thomas, J, ,**

Mailing Address 2 Glenwood Rd

City Scarsdale State NY Zip Code 10583-2718

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

Name of Employer Norton Rose Fulbright Occupation Attorney

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2018

Transaction ID : **VNJ3JH4JKM8**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Nunez, Ivonne, A, ,**

Mailing Address 617 E 11Th St

City New York State NY Zip Code 10009-9750

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

Name of Employer C-Town Occupation Manager

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : **VNJ3JH43DQO**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Perez, Edwin, , ,**

Mailing Address 750 Bradley Pkwy

City Blauvelt State NY Zip Code 10913-1141

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

Name of Employer Inwood Marqueta Occupation Owner

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2018

Transaction ID : **VNJ3JH3D753**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ► \_\_\_\_\_ 4200.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Perez, Rafael, , ,**

Mailing Address 153 Broadfield Rd

City New Rochelle State NY Zip Code 10804-2307

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

Name of Employer First Aid Pharmacy Occupation Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2018

Transaction ID : **VNJ3JH3D787**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Quezada, Ramon, L, ,**

Mailing Address 78 Easton St

City Lawrence State MA Zip Code 01843-2514

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

Name of Employer Labor On Site Occupation General Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 06 / 2018

Transaction ID : **VNJ3JH1N0T2**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ramirez, Cesar, , ,**

Mailing Address 9704 Wyland Ct

City Windermere State FL Zip Code 34786-5610

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

Name of Employer C-Town Supermarket Occupation Supermarket Owner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

Transaction ID : **VNJ3JH42ME7**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Santana, Christian, , ,**  
 Mailing Address 100 W Broad St  
 City Hazleton State PA Zip Code 18201-6304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Dentist  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2018  
**Transaction ID : VNJ3JH3YC64**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sheen, Ed, , ,**  
 Mailing Address 4750 Bedford Ave  
 City Brooklyn State NY Zip Code 11235-2651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Broadway Pharmacy Occupation Owner  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2018  
**Transaction ID : VNJ3JH3D6X0**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Tallaj Urena, Ramon, Tallaj, Mr.,**  
 Mailing Address 25 Clarkson Ct  
 City Paramus State NJ Zip Code 07652-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St Clare's Family Health Center Occupation MD  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2018  
**Transaction ID : VNJ3JH42JK1**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

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

2000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Tapia-Mendoza, Juan, , Dr.,**  
 Mailing Address 1380 Riverside Dr  
Apt 12G  
 City New York State NY Zip Code 10033-1028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pediatrics 2000, P.C. Occupation Pediatrician  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2018  
**Transaction ID : VNJ3JH42JD4**  
 Amount of Each Receipt this Period  
 1200.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tapia-Mendoza, Juan, , Dr.,**  
 Mailing Address 1380 Riverside Dr  
Apt 12G  
 City New York State NY Zip Code 10033-1028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pediatrics 2000, P.C. Occupation Pediatrician  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2018  
**Transaction ID : VNJ3JH42JE2**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Taveras, Fernando, T., ,**  
 Mailing Address 130 Irving St  
 City Leonia State NJ Zip Code 07605-1229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Centro M?dico Dominicano Occupation Psychiatrist  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2018  
**Transaction ID : VNJ3JH3D6N7**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

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

3000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Taveras, Jose, Luis, ,**  
Mailing Address 10214 37Th Ave  
City Corona State NY Zip Code 11368-1943  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lighthouse Restaurant Occupation Restaurateur  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2018  
Transaction ID : **VNJ3JH42NA9**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Weitz, Paul, , ,**  
Mailing Address 55 Broadway  
City New York State NY Zip Code 10006-3008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Paul Weitz & Associates Occupation Partner  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 23 / 2018  
Transaction ID : **VNJ3JH4JKR9**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Zigras, Virginia, , ,**  
Mailing Address 3904 12Th St S  
City Arlington State VA Zip Code 22204-4204  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NCTA Occupation Vice President  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 14 / 2018  
Transaction ID : **VNJ3JHA2DS0**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶ 31200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 61	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**American Federation Of State, County & Municipal Employees**

Mailing Address 1625 L St NW

City Washington	State DC	Zip Code 20036-5665
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C3000798

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2018

**Transaction ID : VNJ3JH5Q2H8**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION**

Mailing Address 555 New Jersey Ave NW

City Washington	State DC	Zip Code 20001-2029
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00028860

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2018

**Transaction ID : VNJ3JHAMXN3**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**APWU COPA**

Mailing Address 1300 L St NW

City Washington	State DC	Zip Code 20005-4107
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010322

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2018

**Transaction ID : VNJ3JH5JW76**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 61	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S Akard St  
Ste 1812

City Dallas	State TX	Zip Code 75202-4206
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2018

**Transaction ID : VNJ3JHA9V98**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DRIVE Committee**

Mailing Address 25 Louisiana Ave NW

City Washington	State DC	Zip Code 20001-2130
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032979

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2018

**Transaction ID : VNJ3JH3Y950**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Friends Of Hector Carlos Lora For Mayor Of Passaic**

Mailing Address 750 River Dr  
Apt 1G

City Passaic	State NJ	Zip Code 07055-5357
-----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2018

**Transaction ID : VNJ3JH3D9B4**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : VNJ3JH3D9B4

Candidate authorized committee registered with the New Jersey Election Commission

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 61	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Friends Of Julio A. Guridy**

Mailing Address 3611 Aster St

City Allentown	State PA	Zip Code 18104-4541
-------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 17 / 2018

**Transaction ID : VNJ3JH3YBA5**

Amount of Each Receipt this Period  

250.00
--------

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Intel PAC**

Mailing Address 1155 F St NW  
Ste 1025

City Washington	State DC	Zip Code 20004-1342
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00125641

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 05 / 2018

**Transaction ID : VNJ3JHD1CE0**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**POLITICAL ACTION COMMITTEE OF THE INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES**

Mailing Address 207 W 25Th St  
Fl 4

City New York	State NY	Zip Code 10001-7119
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00344325

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
05 / 25 / 2018

**Transaction ID : VNJ3JHA9VA6**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : VNJ3JH3YBA5

Authorized candidate committee registered with Board of Elections of Lehigh County

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 61	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

**A.** Full Name (Last, First, Middle Initial)  
**Schaer For Assembly**

Mailing Address 511 Passaic Ave

City Passaic	State NJ	Zip Code 07055-3325
-----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 10 / 2018

**Transaction ID : VNJ3JH3D7F2**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)**

Mailing Address 601 13Th St NW  
SUITE 700 NORTH

City Washington	State DC	Zip Code 20005-3807
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00431361

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

**Transaction ID : VNJ3JH5JW35**

Amount of Each Receipt this Period  

500.00
--------

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)**

Mailing Address 601 13Th St NW  
SUITE 700 NORTH

City Washington	State DC	Zip Code 20005-3807
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00431361

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

**Transaction ID : VNJ3JH5JW43**

Amount of Each Receipt this Period  

500.00
--------

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11250.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : VNJ3JH3D7F2

Candidate authorized committee registered with the New Jersey Election Commission

Form/Schedule:

Transaction ID:

**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 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. 809 Bar And Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2018
Mailing Address 112 Dyckman St		FEC Identification Number C
City New York	State NY	Zip Code 10040-1001
Purpose of Disbursement Community Leader Meeting	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 37.19	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAABJR1
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. 809 Bar And Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018
Mailing Address 112 Dyckman St		FEC Identification Number C
City New York	State NY	Zip Code 10040-1001
Purpose of Disbursement Fundraising Meeting	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 15.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAABJW2
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. 809 Bar And Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2018
Mailing Address 112 Dyckman St		FEC Identification Number C
City New York	State NY	Zip Code 10040-1001
Purpose of Disbursement Constituent Meeting	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 147.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAABKB1
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	200.61
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 216.28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA9Z78
State:      District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 139.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA9Z86
State:      District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ActBlue</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fee	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 43.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAAB505
State:      District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	399.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fee	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 0.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAABHK0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fees	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 0.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAACC30
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fees	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 39.58	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFMX8
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	40.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fees	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 33.70	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFMY6
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Processing Fee	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 59.61	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAG0P7
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fees	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 0.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHR58
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	93.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2018
Mailing Address 366 Summer St		FEC Identification Number C
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Credit Card Fees	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 0.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHRT6
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2018
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155-2605
Purpose of Disbursement Airfare	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 124.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA9ZG0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Anchor Heights</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2018
Mailing Address 575 W 207Th St		FEC Identification Number C
City New York	State NY	Zip Code 10034-2607
Purpose of Disbursement Fundraising Meeting	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 86.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHWV3
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	210.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Anchor Heights</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2018
Mailing Address 575 W 207Th St		FEC Identification Number C
City New York	State NY	Zip Code 10034-2607
Purpose of Disbursement Constituent Meeting	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 261.02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Anchor Wine Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2018
Mailing Address 3508 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10031-5621
Purpose of Disbursement Dinner with Club	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 226.62
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Batista, Aneiry, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2018
Mailing Address 3 Fordham Hill Oval Apt 17B		FEC Identification Number C
City Bronx	State NY	Zip Code 10468-4709
Purpose of Disbursement Reimbursement	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 984.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1471.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Amazon.Com</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2018		
Mailing Address 4601 26Th Ave NE			FEC Identification Number C		
City Seattle	State WA	Zip Code 98105-5026	Amount of Each Disbursement this Period 641.27		
Purpose of Disbursement Office Printer		Category/ Type	Transaction ID : VNH4AAA9531		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. NYC Board Of Elections</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2018		
Mailing Address 200 Varick St Fl 10			FEC Identification Number C		
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 110.00		
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA95A6		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. NYC Board Of Elections</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2018		
Mailing Address 200 Varick St Fl 10			FEC Identification Number C		
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 70.00		
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA95C2		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. NYC Board Of Elections</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2018		
Mailing Address 200 Varick St FI 10			FEC Identification Number C		
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 50.00		
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA9565		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. NYC Board Of Elections</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2018		
Mailing Address 200 Varick St FI 10			FEC Identification Number C		
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA9581		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. NYC Board Of Elections</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address 200 Varick St FI 10			FEC Identification Number C		
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 10.00		
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA9557		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. NYC Board Of Elections</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2018	
Mailing Address 200 Varick St FI 10			FEC Identification Number C	
City New York	State NY	Zip Code 10014-7431	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Voter Files		Category/ Type	Transaction ID : VNH4AAA9598	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Betel Party Supply</b>			Date of Disbursement MM / DD / YYYY 04 / 12 / 2018	
Mailing Address 74 Sherman Ave			FEC Identification Number C	
City New York	State NY	Zip Code 10040-1029	Amount of Each Disbursement this Period 123.00	
Purpose of Disbursement Petition Volunteer Event		Category/ Type 001	Transaction ID : VNH4AAA8JS8	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Betel Party Supply</b>			Date of Disbursement MM / DD / YYYY 05 / 01 / 2018	
Mailing Address 74 Sherman Ave			FEC Identification Number C	
City New York	State NY	Zip Code 10040-1029	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Community Leaders Event		Category/ Type 001	Transaction ID : VNH4AAA8M80	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	173.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. BP Fuel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 4353 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10033-2410
Purpose of Disbursement Fuel		Category/ Type 002
Candidate Name		Amount of Each Disbursement this Period 47.01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA98G0
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. BP Fuel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2018
Mailing Address 4353 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10033-2410
Purpose of Disbursement Fuel		Category/ Type 002
Candidate Name		Amount of Each Disbursement this Period 40.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA98J6
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. BP Fuel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018
Mailing Address 4353 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10033-2410
Purpose of Disbursement Fuel		Category/ Type 002
Candidate Name		Amount of Each Disbursement this Period 44.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA98P8
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	131.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. BP Nagle Fuel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 3936 10Th Ave		FEC Identification Number C
City New York	State NY	Zip Code 10034-1843
Purpose of Disbursement Fuel	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 45.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Cafe Rubio</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2018
Mailing Address 9805 Northern Blvd		FEC Identification Number C
City Corona	State NY	Zip Code 11368-1041
Purpose of Disbursement Fundraiser	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 2100.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. CATO Travel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2018
Mailing Address 9 Independence Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20515-0001
Purpose of Disbursement Travel Agent Fee	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2175.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. CATO Travel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2018
Mailing Address 9 Independence Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20515-0001
Purpose of Disbursement Travel Agent Fee	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA9ZJ5 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Citgo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2018
Mailing Address 2590 Bailey Ave		FEC Identification Number C
City Bronx	State NY	Zip Code 10463-7215
Purpose of Disbursement Fuel	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 46.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA98K4 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Citgo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2018
Mailing Address 2590 Bailey Ave		FEC Identification Number C
City Bronx	State NY	Zip Code 10463-7215
Purpose of Disbursement Fuel	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 39.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA9ZE4 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Citgo</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2018
Mailing Address 2590 Bailey Ave		FEC Identification Number C
City Bronx	State NY	Zip Code 10463-7215
Purpose of Disbursement Fuel		002
Candidate Name		Amount of Each Disbursement this Period 43.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAACY89
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Citgo</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2018
Mailing Address 2590 Bailey Ave		FEC Identification Number C
City Bronx	State NY	Zip Code 10463-7215
Purpose of Disbursement Fuel		002
Candidate Name		Amount of Each Disbursement this Period 41.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFQF3
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Coogan's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2018
Mailing Address 4015 Broadway		FEC Identification Number C
City New York	State NY	Zip Code 10032-1508
Purpose of Disbursement Campaign Kick-Off Luncheon		001
Candidate Name		Amount of Each Disbursement this Period 243.82
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHX10
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	328.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Corner Social</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2018		
Mailing Address 321 Malcolm X Blvd			FEC Identification Number C		
City New York	State NY	Zip Code 10027-3703	Amount of Each Disbursement this Period 137.14		
Purpose of Disbursement Constituent Meeting		Category/ Type 001	Transaction ID : VNH4AAABKC9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. De Los Santos, Manny, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2018		
Mailing Address 82 Wadsworth Ave Apt 4			FEC Identification Number C		
City New York	State NY	Zip Code 10033-7024	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Campaign Manager		Category/ Type 001	Transaction ID : VNH4AAA79M7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. De Los Santos, Manny, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2018		
Mailing Address 82 Wadsworth Ave Apt 4			FEC Identification Number C		
City New York	State NY	Zip Code 10033-7024	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Campaign Manager		Category/ Type 001	Transaction ID : VNH4AAA7XX1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3137.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Dominican Sunday, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2018		
Mailing Address 175 W 107Th St			FEC Identification Number C		
City New York	State NY	Zip Code 10025-3128	Amount of Each Disbursement this Period 350.00		
Purpose of Disbursement Mother's Day Event Sponsorship		Category/ Type 001	Transaction ID : VNH4AAAEG03		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. El Nuevo Caridad Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2018		
Mailing Address 1618 Saint Nicholas Ave			FEC Identification Number C		
City New York	State NY	Zip Code 10040-3311	Amount of Each Disbursement this Period 245.26		
Purpose of Disbursement Political Meeting		Category/ Type 001	Transaction ID : VNH4AAAHWX9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Exelon Corporation</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2018		
Mailing Address 101 Constitution Ave NW FI 4			FEC Identification Number C		
City Washington	State DC	Zip Code 20001-2133	Amount of Each Disbursement this Period 3049.00		
Purpose of Disbursement Fundraiser Suite		Category/ Type 003	Transaction ID : VNH4AAAFNA1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3644.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. EZ Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2018
Mailing Address PO Box 15187		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5187
Purpose of Disbursement Travel/Tolls	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA98N0 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. EZ Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2018
Mailing Address PO Box 15187		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5187
Purpose of Disbursement Travel/Tolls	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAAMK8 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EZ Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2018
Mailing Address PO Box 15187		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5187
Purpose of Disbursement Travel/Tolls	Category/Type 002	
Candidate Name		Amount of Each Disbursement this Period 348.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAHHW1 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	638.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. EZ Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2018
Mailing Address PO Box 15187		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5187
Purpose of Disbursement Travel/Tolls	002	
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAEDP9 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. EZ Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2018
Mailing Address PO Box 15187		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5187
Purpose of Disbursement Travel/Tolls	002	
Candidate Name		Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAH1V4 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Ford Motor Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2018
Mailing Address PO Box 790119		FEC Identification Number C
City Saint Louis	State MO	Zip Code 63179-0119
Purpose of Disbursement Car Rental	002	
Candidate Name		Amount of Each Disbursement this Period 378.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAABHM8 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	668.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Ford Motor Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2018
Mailing Address PO Box 790119		FEC Identification Number C
City Saint Louis	State MO	Zip Code 63179-0119
Purpose of Disbursement Car Rental	002 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 378.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAGG64 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Geico Commercial Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 4295 Ocmulgee East Blvd		FEC Identification Number C
City Macon	State GA	Zip Code 31295-0001
Purpose of Disbursement Vehicle Insurance	002 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 157.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA98A3 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Geico Commercial Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018
Mailing Address 4295 Ocmulgee East Blvd		FEC Identification Number C
City Macon	State GA	Zip Code 31295-0001
Purpose of Disbursement Vehicle Insurance	002 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 157.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAACY14 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	692.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Geico Commercial Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018
Mailing Address 4295 Ocmulgee East Blvd		FEC Identification Number C
City Macon	State GA	Zip Code 31295-0001
Purpose of Disbursement Vehicle Insurance		002
Candidate Name		Amount of Each Disbursement this Period 157.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAGZNS
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Gersowitz Libo &amp; Korek PC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2018
Mailing Address 111 Broadway Fl 12		FEC Identification Number C
City New York	State NY	Zip Code 10006-1901
Purpose of Disbursement Reimbursement		003
Candidate Name		Amount of Each Disbursement this Period 867.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA5QS3
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. The Wine Gallery</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018
Mailing Address 576 Avenue Of The Americas		FEC Identification Number C
City New York	State NY	Zip Code 10011-2019
Purpose of Disbursement Drinks for Fundraiser		
Candidate Name		Amount of Each Disbursement this Period 867.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA5QW7
State: District:		<input checked="" type="checkbox"/> Memo Item *

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1024.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Google SVS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Email Usage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA98E4 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Google SVS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Email Usage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 9.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAA98F2 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Google SVS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Email Usage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.85
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VNH4AAAACY64 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30.81
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Google SVS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018
Mailing Address 1600 Amphitheatre Pkwy			FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351	Amount of Each Disbursement this Period 9.03
Purpose of Disbursement Email Usage		Category/ Type 001	Transaction ID : VNH4AAACY71
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Google SVS</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2018
Mailing Address 1600 Amphitheatre Pkwy			FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351	Amount of Each Disbursement this Period 10.89
Purpose of Disbursement Email Usage		Category/ Type 001	Transaction ID : VNH4AAAGZQ9
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Google SVS</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2018
Mailing Address 1600 Amphitheatre Pkwy			FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351	Amount of Each Disbursement this Period 9.07
Purpose of Disbursement Email Usage		Category/ Type 001	Transaction ID : VNH4AAAGZS5
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Guerrero Flower Shop</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2018		
Mailing Address 4419 Broadway			FEC Identification Number C		
City New York	State NY	Zip Code 10040-4009	Amount of Each Disbursement this Period 168.80		
Purpose of Disbursement Flowers for Mother's Day Event		Category/ Type 001	Transaction ID : VNH4AAAHX78		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Hamilton Campaign Network</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018		
Mailing Address 5030 Broadway Ste 810			FEC Identification Number C		
City New York	State NY	Zip Code 10034-1666	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement April Consulting Fee		Category/ Type 001	Transaction ID : VNH4AAA9227		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Hamilton Campaign Network</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2018		
Mailing Address 5030 Broadway Ste 810			FEC Identification Number C		
City New York	State NY	Zip Code 10034-1666	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement May Consulting Fee		Category/ Type 001	Transaction ID : VNH4AAAABEV7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5168.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Hamilton Campaign Network</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018	
Mailing Address 5030 Broadway Ste 810			FEC Identification Number C	
City New York	State NY	Zip Code 10034-1666	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement June Consulting Fees		Category/ Type 001	Transaction ID : VNH4AAAGBB3	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Harland Clarke</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2018	
Mailing Address 15955 La Cantera Pkwy ? San Antonio TX78256			FEC Identification Number C	
City San Antonio	State TX	Zip Code 78256-2589	Amount of Each Disbursement this Period 172.51	
Purpose of Disbursement Check Reorder		Category/ Type 001	Transaction ID : VNH4AAA98H8	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. HM Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2018	
Mailing Address 220 I St NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-4365	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement Fundraising Consultant		Category/ Type 003	Transaction ID : VNH4AAA94W6	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6172.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. HM Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2018
Mailing Address 220 I St NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4365
Purpose of Disbursement Reimbursement	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 82.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFNB9
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Washington Nationals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2018
Mailing Address 1500 S Capitol St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3599
Purpose of Disbursement Additional Tax for FR	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 82.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFND4
State: District:	<input checked="" type="checkbox"/> Memo Item *	

Full Name (Last, First, Middle Initial) <b>c. HM Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2018
Mailing Address 220 I St NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-4365
Purpose of Disbursement Fundraising Consultant	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 3500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFNF0
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3582.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2018
Mailing Address US Capitol Visitor Center United S United States Capitol		FEC Identification Number C
City Washington	State DC	Zip Code 20510-0001
Purpose of Disbursement Awards for Event	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 228.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHX36
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2018
Mailing Address US Capitol Visitor Center United S United States Capitol		FEC Identification Number C
City Washington	State DC	Zip Code 20510-0001
Purpose of Disbursement Awards for Event	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 53.05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHX44
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. House Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018
Mailing Address US Capitol Visitor Center United S United States Capitol		FEC Identification Number C
City Washington	State DC	Zip Code 20510-0001
Purpose of Disbursement Awards for Event	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 29.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHX60
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	310.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Il Gattopardo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2018		
Mailing Address 13-15 W 54Th St			FEC Identification Number C		
City New York	State NY	Zip Code 10019	Amount of Each Disbursement this Period 265.00		
Purpose of Disbursement Fundraising Meeting		Category/ Type 003	Transaction ID : VNH4AAAHX52		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Indian Road Cafe</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2018		
Mailing Address 600 W 218Th St			FEC Identification Number C		
City New York	State NY	Zip Code 10034-1000	Amount of Each Disbursement this Period 400.51		
Purpose of Disbursement Constituent Breakfast		Category/ Type 001	Transaction ID : VNH4AAAHXK2		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Inner Circle</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2018		
Mailing Address P.O. Box 5372			FEC Identification Number C		
City New York	State NY	Zip Code 10158	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Charity Dinner Ticket		Category/ Type 001	Transaction ID : VNH4AAA80F7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	915.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 61			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. La Casa Del Mofongo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 1447 Saint Nicholas Ave			FEC Identification Number C		
City New York	State NY	Zip Code 10033-4004	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Campaign Kickoff		Category/ Type 001	Transaction ID : VNH4AAAHX93		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. La Casa Del Mofongo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 1447 Saint Nicholas Ave			FEC Identification Number C		
City New York	State NY	Zip Code 10033-4004	Amount of Each Disbursement this Period 979.88		
Purpose of Disbursement Campaign Kickoff		Category/ Type 001	Transaction ID : VNH4AAAHXA1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. La Casa Del Mofongo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 1447 Saint Nicholas Ave			FEC Identification Number C		
City New York	State NY	Zip Code 10033-4004	Amount of Each Disbursement this Period 153.90		
Purpose of Disbursement Campaign Kickoff		Category/ Type 001	Transaction ID : VNH4AAAHXB9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4633.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. La Casa Del Mofongo</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 1447 Saint Nicholas Ave					
City New York	State NY	Zip Code 10033-4004	FEC Identification Number C		
Purpose of Disbursement Campaign Kickoff		Category/ Type 001	Amount of Each Disbursement this Period 36.58		
Candidate Name		Transaction ID : VNH4AAAHC7			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Lilly, Keith, L, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2018		
Mailing Address 163 W 125Th St Apt 912					
City New York	State NY	Zip Code 10027-4436	FEC Identification Number C		
Purpose of Disbursement Campaign Operations		Category/ Type 001	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Transaction ID : VNH4AAA5RC3			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Macorix Productions Corp.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2018		
Mailing Address 619 W 176Th St B					
City New York	State NY	Zip Code 10033-7829	FEC Identification Number C		
Purpose of Disbursement Video Production		Category/ Type 001	Amount of Each Disbursement this Period 300.00		
Candidate Name		Transaction ID : VNH4AAAADF6			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1836.58
<b>TOTAL</b> This Period (last page this line number only).....	1836.58

**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 52 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Mamajuana Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018
Mailing Address 247 Dyckman St		FEC Identification Number C
City New York	State NY	Zip Code 10034-5349
Purpose of Disbursement Political Meeting	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 101.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHWR9
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Mamajuana Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 247 Dyckman St		FEC Identification Number C
City New York	State NY	Zip Code 10034-5349
Purpose of Disbursement Political Meeting	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 157.18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHWY7
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Mi Cuba Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2018
Mailing Address 1424 Park Rd NW		FEC Identification Number C
City Washington	State DC	Zip Code 20010-2802
Purpose of Disbursement Fundraising Meeting	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 182.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHXF1
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	441.11
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2018
Mailing Address 30 Ivy St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4006
Purpose of Disbursement Political Meeting	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 82.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAHXE3
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. NGP Van Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 1101 15Th St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-5002
Purpose of Disbursement 2018 Committee Setting	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA98B1
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. NGP Van Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2018
Mailing Address 1101 15Th St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20005-5002
Purpose of Disbursement Database Management	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA9ZV6
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3182.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 61			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. NGP Van Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018		
Mailing Address 1101 15Th St NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20005-5002	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement 2018 Committee Setting		Category/ Type 001	Transaction ID : VNH4AAACY30		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. NGP Van Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2018		
Mailing Address 1101 15Th St NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20005-5002	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement 2018 Committee Setting		Category/ Type 001	Transaction ID : VNH4AAAGZP1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Oyamel Cocina Mexicana</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2018		
Mailing Address 401 7Th St NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20004-2202	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Food for Political Meeting		Category/ Type 001	Transaction ID : VNH4AAAHXM0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Red Wine Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018		
Mailing Address 701 Adams Ave			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19124-2350	Amount of Each Disbursement this Period 750.00		
Purpose of Disbursement Fundraiser		Category/ Type 003	Transaction ID : VNH4AAABJT6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Red Wine Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018		
Mailing Address 701 Adams Ave			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19124-2350	Amount of Each Disbursement this Period 34.03		
Purpose of Disbursement Fundraiser		Category/ Type 003	Transaction ID : VNH4AAABJV4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Rodriguez, Harry, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2018		
Mailing Address 1809 3Rd Ave Apt 4B			FEC Identification Number C		
City New York	State NY	Zip Code 10029-6108	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Father's Day Event Sponsorship		Category/ Type 001	Transaction ID : VNH4AAAEDK5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1284.03
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 61			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Sage Payment Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018		
Mailing Address 12120 Sunset Hills Rd Ste 500			FEC Identification Number C		
City Reston	State VA	Zip Code 20190-5858	Amount of Each Disbursement this Period 28.05		
Purpose of Disbursement Credit Card Fees		Category/ Type 003	Transaction ID : VNH4AAA98D6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2018		
Mailing Address 12120 Sunset Hills Rd Ste 500			FEC Identification Number C		
City Reston	State VA	Zip Code 20190-5858	Amount of Each Disbursement this Period 43.36		
Purpose of Disbursement Credit Card Fees		Category/ Type 003	Transaction ID : VNH4AAACY56		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Sage Payment Solutions</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2018		
Mailing Address 12120 Sunset Hills Rd Ste 500			FEC Identification Number C		
City Reston	State VA	Zip Code 20190-5858	Amount of Each Disbursement this Period 10.52		
Purpose of Disbursement Credit Card Fees		Category/ Type 003	Transaction ID : VNH4AAAAGZR7		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	81.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Schlein, Stanley, K, Mr., Esq.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2018
Mailing Address 481 King Ave		FEC Identification Number C
City Bronx	State NY	Zip Code 10464-1228
Purpose of Disbursement Legal Fees/Petitioning	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 7500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA5ZH7
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Standing Room Only</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2018
Mailing Address 1491 Weaver St		FEC Identification Number C
City Scarsdale	State NY	Zip Code 10583-7018
Purpose of Disbursement Supplies for Fundraiser	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 1860.42	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA5RB5
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Sylvia's Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2018
Mailing Address 328 Malcolm X Blvd		FEC Identification Number C
City New York	State NY	Zip Code 10027-3702
Purpose of Disbursement Community Leader Meeting	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 46.87	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAABKD6
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9407.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Tioga Carver Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2018
Mailing Address 2542 7Th Ave		FEC Identification Number C
City New York	State NY	Zip Code 10039-3540
Purpose of Disbursement Petitioning Assistance	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA93P8
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018
Mailing Address 90 Vermilyea Ave		FEC Identification Number C
City New York	State NY	Zip Code 10034-9998
Purpose of Disbursement P.O. Box Renewal	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 296.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAA9ZF2
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2018
Mailing Address PO Box 15124		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5124
Purpose of Disbursement Cell Phone Service	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 150.03
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAAMJ0
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1946.03
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espallat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. Washington Nationals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2018
Mailing Address 1500 S Capitol St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3599
Purpose of Disbursement Fundraiser Suite	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 1032.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFQ12
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Washington Nationals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2018
Mailing Address 1500 S Capitol St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3599
Purpose of Disbursement FR Food/Drink Items	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 60.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VNH4AAAFQ20
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1092.00
<b>TOTAL</b> This Period (last page this line number only).....▶	55708.41

**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 60 OF 61	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. ESPAILLAT FOR CONGRESS 2016</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2018
Mailing Address 210 Sherman Ave Ste A		FEC Identification Number C C00593525
City New York	State NY	Zip Code 10034-3350
Purpose of Disbursement Transfer Out		Amount of Each Disbursement this Period 8000.00
Candidate Name <b>Espailat, Adriano, , ,</b>		Transaction ID : VNH4AAA8F76
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 13	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8000.00

**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 61 OF 61
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Espailat for Congress 2018**

Full Name (Last, First, Middle Initial) <b>A. BFRDC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2018
Mailing Address 640 W 231St St Apt 4B		FEC Identification Number C
City Bronx	State NY	Zip Code 10463-3257
Purpose of Disbursement Gala Ticket		012 Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNH4AAAAMS5 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. JUANA MATIAS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018
Mailing Address PO Box 555		FEC Identification Number C C00657213
City Lawrence	State MA	Zip Code 01842-1155
Purpose of Disbursement Contribution		011 Category/ Type
Candidate Name MATIAS, JUANA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: MA District: 03		Amount of Each Disbursement this Period 2700.00 Transaction ID : VNH4AAAFQB1 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3700.00