

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**AMALGAMATED BANK PAC**

ADDRESS (number and street) **275 SEVENTH AVENUE**  
Check if different than previously reported. (ACC) **NEW YORK NY 10001**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00379693** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  07 01 2016 through  /  /  09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Brown, Sam, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Brown, Sam, , ,* [Electronically Filed] Date  /  /  10 13 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**AMALGAMATED BANK PAC**

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2016"/>  | <input type="text" value="6652.00"/>  | <input type="text" value="6652.00"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="21373.65"/> |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="19606.98"/> | <input type="text" value="46886.98"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="40980.63"/> | <input type="text" value="53538.98"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="38000.00"/> | <input type="text" value="50558.35"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="2980.63"/>  | <input type="text" value="2980.63"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>     |                                       |

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**AMALGAMATED BANK PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2016 To: M M / D D / Y Y Y Y 09 / 30 / 2016

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 12979.00                      | 36860.00                          |
| (ii) Unitemized .....   | 767.00                        | 4166.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 13746.00                      | 41026.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 13746.00                      | 41026.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 5860.98                       | 5860.98                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 19606.98                      | 46886.98                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 19606.98                      | 46886.98                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 38000.00                      | 50043.35                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 515.00                            |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 515.00                            |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 38000.00                      | 50558.35                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 38000.00                      | 50558.35                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 13746.00                              | 41026.00                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 515.00                                    |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 13746.00                              | 40511.00                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                                  | 0.00                                      |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                                  | 0.00                                      |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 6 OF 23  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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

NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Bae, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 251-53 71st Rd  
 2nd Fl  
 City Bellerose State NY Zip Code 11426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) VP Product & Client Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4858**  
 Amount of Each Receipt this Period 161.00  
 Memo Item  
 Payroll Deduction: \$23.00 Bi-Weekly

**B. Brown, Sam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1825 K Street, NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Executive VP, Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4875**  
 Amount of Each Receipt this Period 1344.00  
 Memo Item  
 Payroll Deduction: \$192.00 Bi-Weekly

**C. Chalkin, Maxwell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Paulin Blvd  
 City Leonia State NJ Zip Code 07605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) AVP Channels  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4871**  
 Amount of Each Receipt this Period 105.00  
 Memo Item  
 Payroll Deduction: \$15.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1610.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 7 OF 23                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Colasuonno, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Berry Ave., W  
 City Staten Island State NY Zip Code 10212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4863**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

**B. Collins, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18912 St. Albert Dr.  
 City Brookeville State MD Zip Code 20833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) FVP Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4861**  
 Amount of Each Receipt this Period 245.00  
 Memo Item  
 Payroll Deduction: \$35.00 Bi-Weekly

**C. Crisco, Duane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Middle Beach Road  
 City Madison State CT Zip Code 06443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) EVP C&I Lending  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3610.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4848**  
 Amount of Each Receipt this Period 1330.00  
 Memo Item  
 Payroll Deduction: \$190.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1715.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 8 OF 23                 |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |
| <input type="checkbox"/> 12   | <input type="checkbox"/> 16  | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Culhane-Benameur, Molly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 E. West Highway  
Apt 138

City Silver Spring State MD Zip Code 20910

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

Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
874.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016

**Transaction ID : SA11AI.4873**

Amount of Each Receipt this Period  
322.00

Memo Item  
 Payroll Deduction: \$46.00 Bi-Weekly

**B. Ewers, Landon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 W 43rd St  
Apt 27K

City New York State NY Zip Code 10036

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

Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Information Technology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
874.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016

**Transaction ID : SA11AI.4862**

Amount of Each Receipt this Period  
322.00

Memo Item  
 Payroll Deduction: \$46.00 Bi-Weekly

**C. Fink, Anna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 706 Geranium St NW

City Washington State DC Zip Code 20012

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

Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) First Vice President

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2016

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period  
245.00

Memo Item  
 Payroll Deduction: \$35.00 Bi-Weekly

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 889.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 OF 23                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Frisch, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Concord Dr.  
 City Staten Island State NY Zip Code 10956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4880**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

**B. Frishberg, Ivan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 D St SE  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) First VP, Sustainability Banking  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4853**  
 Amount of Each Receipt this Period 245.00  
 Memo Item  
 Payroll Deduction: \$35.00 Bi-Weekly

**C. Grant, Emile, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 52 Rose Ave.  
 City Spring Valley State NY Zip Code 10977  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4850**  
 Amount of Each Receipt this Period 84.00  
 Memo Item  
 Payroll Deduction: \$12.00 Bi-Weekly

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 469.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 10 OF 23   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Hogan, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 Watchung Plaza, #205  
 City Montclair State NJ Zip Code 07042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) First VP-Director, Product Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 995.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4881**  
 Amount of Each Receipt this Period 385.00  
 Memo Item  
 Payroll Deduction: \$55.00 Bi-Weekly

**B. Ibarra, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22110 Del Valle St.  
 City Woodland Hills State CA Zip Code 91364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Senior VP, Investment Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 782.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4872**  
 Amount of Each Receipt this Period 322.00  
 Memo Item  
 Payroll Deduction: \$46.00 Bi-Weekly

**C. Keaney, Maura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 W. 107th St Apt 2E  
 City New York State NY Zip Code 10025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) First VP, Non-Profit and Fnd Banking  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4870**  
 Amount of Each Receipt this Period 350.00  
 Memo Item  
 Payroll Deduction: \$50.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1057.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 11 OF 23 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |               |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Kipnis, Barry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Vanderwater Ct  
 City East Brunswick    State NJ    Zip Code 08816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank    Occupation (for Individual) SVP Trust Operations  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 874.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4840**  
 Amount of Each Receipt this Period 322.00  
 Memo Item  
 Payroll Deduction: \$46.00 Bi-Weekly

**B. Krivine, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 333 East 49th St.  
 City New York    State NY    Zip Code 10017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank    Occupation (for Individual) Vice President  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4845**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

**C. LaBenne, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 315 Trumbull Road  
 City Manhasset    State NY    Zip Code 11030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank    Occupation (for Individual) EVP Finance  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4836**  
 Amount of Each Receipt this Period 1050.00  
 Memo Item  
 Payroll Deduction: \$150.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1512.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 12 OF 23   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Lingberg, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18111 Parreco Frm Dr  
 City Germantown State MD Zip Code 20874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Senior VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4854**  
 Amount of Each Receipt this Period 350.00  
 Memo Item  
 Payroll Deduction: \$50.00 Bi-Weekly

**B. Mestrich, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 275 Seventh Ave  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3648.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4860**  
 Amount of Each Receipt this Period 1344.00  
 Memo Item  
 Payroll Deduction: \$192.00 Bi-Weekly

**C. Minter, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 275 Seventh Ave.  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Chief Credit Risk Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4867**  
 Amount of Each Receipt this Period 700.00  
 Memo Item  
 Payroll Deduction: \$100.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2394.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

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

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Moore, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 999 E. Ridgewood Ave.  
 City Ridgewood State NJ Zip Code 07450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) First Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4877**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

**B. Murrell, Martin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5509 33rd St NW  
 City Washington State DC Zip Code 20015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Executive VP of Consumer Banking  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4869**  
 Amount of Each Receipt this Period 1400.00  
 Memo Item  
 Payroll Deduction: \$200.00 Bi-Weekly

**C. Nachem, Ira, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 155 Brewster St.  
 City Bridgeport State CT Zip Code 06605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Senior Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4852**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1680.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. Pappas, Mark, , ,</b>                  |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2016                        |
| Mailing Address 210 Manhasset Ave   |   | <b>Transaction ID : SA11AI.4868</b>  |
| City<br>Manhasset   | State<br>NY                                       | Zip Code<br>11030  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>350.00      |  |
| Name of Employer (for Individual)<br>Amalgamated Bank   | Occupation (for Individual)<br>SVP Internal Audit | <input type="checkbox"/> Memo Item<br>Payroll Deduction: \$50.00 Bi-Weekly |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>950.00                |  |

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Phillips, William, , ,</b>             |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2016                        |
| Mailing Address 415 E Pine St<br>Apt 1709   |   | <b>Transaction ID : SA11AI.4882</b>  |
| City<br>Orlando   | State<br>FL   | Zip Code<br>32801  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>245.00            |  |
| Name of Employer (for Individual)<br>Amalgamated Bank   | Occupation (for Individual)<br>FVP Business Development | <input type="checkbox"/> Memo Item<br>Payroll Deduction: \$35.00 Bi-Weekly |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>665.00                      |  |

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Prusan, Arthur, , ,</b>              |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2016                        |
| Mailing Address 37 Oakland Road   |   | <b>Transaction ID : SA11AI.4839</b>  |
| City<br>Maplewood   | State<br>NJ   | Zip Code<br>07040  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>322.00        |  |
| Name of Employer (for Individual)<br>Amalgamated Bank   | Occupation (for Individual)<br>SVP Credit Risk Mgmt | <input type="checkbox"/> Memo Item<br>Payroll Deduction: \$46.00 Bi-Weekly |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>874.00                  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 917.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

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

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Pyle, Vincent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 318 W. 117th St.  
 City New York State NY Zip Code 10026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4879**  
 Amount of Each Receipt this Period 161.00  
 Memo Item  
 Payroll Deduction: \$23.00 Bi-Weekly

**B. Salas, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1032 N Central Dr  
 City North Massapequa State NY Zip Code 11758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) VP Branch Network  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4833**  
 Amount of Each Receipt this Period 161.00  
 Memo Item  
 Payroll Deduction: \$23.00 Bi-Weekly

**C. Sforza, Toni-Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 Bronxville Road Apt 7B  
 City Bronxville State NY Zip Code 10708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Human Resources  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4878**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 462.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 16 OF 23   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. Smalley, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 426 Riders Lane  
 City Fairfield State CT Zip Code 06824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Commercial Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4841**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 Payroll Deduction: \$20.00 Bi-Weekly

**B. Trevino, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 W 77th St #6H  
 City New York State NY Zip Code 10024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Channels  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 01 / 2016  
**Transaction ID : SA11AI.4842**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Payroll Deduction: \$50.00 Bi-Weekly

**C. Wolff, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 552 W 43rd St Apt 3B  
 City New York State NY Zip Code 10036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amalgamated Bank Occupation (for Individual) SVP Community Banking  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.4837**  
 Amount of Each Receipt this Period 84.00  
 Memo Item  
 Payroll Deduction: \$12.00 Bi-Weekly

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 274.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 12979.00 |

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

|   |                              |                                   |  |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 17 OF 23                          |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input checked="" type="checkbox"/> 16 |
|   |                              |                                   | <input type="checkbox"/> 17            |

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**RUSS FOR WISCONSIN**

Mailing Address **PO BOX 620061**

|                          |                    |                          |
|--------------------------|--------------------|--------------------------|
| City<br><b>MIDDLETON</b> | State<br><b>WI</b> | Zip Code<br><b>53562</b> |
|--------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C C00578013**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5860.98**

Date of Receipt  
**08 / 18 / 2016**

**Transaction ID : SA16.4922**

Amount of Each Receipt this Period  
**5860.98**

Memo Item

Refund Comprised of Contributions Made to ONW Victory Fund

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

|            |             |                |
|------------|-------------|----------------|
| City _____ | State _____ | Zip Code _____ |
|------------|-------------|----------------|

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

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt \_\_\_\_\_

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

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

|            |             |                |
|------------|-------------|----------------|
| City _____ | State _____ | Zip Code _____ |
|------------|-------------|----------------|

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

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt \_\_\_\_\_

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

Memo Item

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>5860.98</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>5860.98</b> |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AMERICA WORKS PAC</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 14 / 2016                      |
| Mailing Address PO BOX 15293  |  | FEC Identification Number<br>C C00331694<br><b>Transaction ID : SB23.4914</b> |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20003   |
| Purpose of Disbursement<br>Contribution   |  | Amount of Each Disbursement this Period<br>5000.00                            |
| Candidate Name<br><b>AMERICA WORKS PAC</b>  |  | Category/Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: District:  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BARRAGAN FOR CONGRESS</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 26 / 2016                      |
| Mailing Address 1840 SOUTH GAFFEY STREET #421  |  | FEC Identification Number<br>C C00577353<br><b>Transaction ID : SB23.4910</b> |
| City<br>SAN PEDRO  | State<br>CA  | Zip Code<br>90731   |
| Purpose of Disbursement<br>Contribution  |  | Amount of Each Disbursement this Period<br>2500.00                            |
| Candidate Name<br><b>BARRAGAN, NANETTE, , ,</b>  |  | Category/Type   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item  |
| State: CA District: 44   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. CARROLL FOR COLORADO</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 26 / 2016                      |
| Mailing Address PO BOX 470783  |  | FEC Identification Number<br>C C00580647<br><b>Transaction ID : SB23.4911</b> |
| City<br>AURORA   | State<br>CO  | Zip Code<br>80047   |
| Purpose of Disbursement<br>Contribution  |  | Amount of Each Disbursement this Period<br>2500.00                            |
| Candidate Name<br><b>CARROLL, MORGAN, , ,</b>  |  | Category/Type   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: CO District: 06   |  |   |

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. EVAN BAYH COMMITTEE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2016  |
| Mailing Address 850 FORT WAYNE AVENUE   |  | FEC Identification Number<br>C C00306860<br><b>Transaction ID : SB23.4915</b><br>Amount of Each Disbursement this Period<br>2500.00 |
| City<br>INDIANAPOLIS  | State<br>IN  | Zip Code<br>46220   |
| Purpose of Disbursement<br>Contribution   |  | Category/<br>Type   |
| Candidate Name<br><b>BAYH, EVAN, , ,</b>  |  | Memo Item <input type="checkbox"/>  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: IN   | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. FRIENDS OF ANNA THRONE-HOLST</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2016  |
| Mailing Address PO BOX 6   |  | FEC Identification Number<br>C C00578401<br><b>Transaction ID : SB23.4916</b><br>Amount of Each Disbursement this Period<br>2500.00 |
| City<br>SOUTHAMPTON  | State<br>NY  | Zip Code<br>11969   |
| Purpose of Disbursement<br>Contribution  |  | Category/<br>Type   |
| Candidate Name<br><b>THRONE-HOLST, ANNA, , ,</b>   |  | Memo Item <input type="checkbox"/>  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: NY  | District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. FRIENDS OF MARK WARNER</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 18 / 2016  |
| Mailing Address 201 NORTH UNION STREET<br>SUITE 300  |  | FEC Identification Number<br>C C00438713<br><b>Transaction ID : SB23.4906</b><br>Amount of Each Disbursement this Period<br>1000.00 |
| City<br>ALEXANDRIA   | State<br>VA  | Zip Code<br>22314   |
| Purpose of Disbursement<br>Contribution  |  | Category/<br>Type   |
| Candidate Name<br><b>WARNER, MARK ROBERT, , ,</b>  |  | Memo Item <input type="checkbox"/>  |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: VA  | District:  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. FRIENDS OF PATRICK MURPHY</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2016                    |
| Mailing Address 4521 PGA BLVD #412   |  | FEC Identification Number<br>C00493825<br><b>Transaction ID : SB23.4921</b> |
| City<br>PALM BEACH GARDENS   | State<br>FL  | Zip Code<br>33418   |
| Purpose of Disbursement<br>Contribution  |  | Amount of Each Disbursement this Period<br>2500.00                          |
| Candidate Name<br><b>MURPHY, PATRICK E, , ,</b>  |  | Category/Type   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: FL  | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. JOSH GOTTHEIMER FOR CONGRESS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 18 / 2016                    |
| Mailing Address PO BOX 584   |  | FEC Identification Number<br>C00573949<br><b>Transaction ID : SB23.4907</b> |
| City<br>RIDGEWOOD  | State<br>NJ  | Zip Code<br>07451   |
| Purpose of Disbursement<br>Contribution  |  | Amount of Each Disbursement this Period<br>1000.00                          |
| Candidate Name<br><b>GOTTHEIMER, JOSH, , ,</b>   |  | Category/Type   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: NJ  | District: 05   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. JOSH GOTTHEIMER FOR CONGRESS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 19 / 2016                    |
| Mailing Address PO BOX 584   |  | FEC Identification Number<br>C00573949<br><b>Transaction ID : SB23.4917</b> |
| City<br>RIDGEWOOD  | State<br>NJ  | Zip Code<br>07451   |
| Purpose of Disbursement<br>Contribution  |  | Amount of Each Disbursement this Period<br>2500.00                          |
| Candidate Name<br><b>GOTTHEIMER, JOSH, , ,</b>   |  | Category/Type   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: NJ  | District: 05   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 6000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE</b>                          |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 29 / 2016  |
| Mailing Address 606 TOWNSEND ST.  |  | FEC Identification Number<br>C C00031054<br><b>Transaction ID : SB23.4920</b><br>Amount of Each Disbursement this Period<br>2500.00 |
| City<br>LANSING   | State<br>MI  | Zip Code<br>48933   |
| Purpose of Disbursement<br>Contribution   | Category/<br>Type  |   |
| Candidate Name  | Memo Item <input type="checkbox"/>   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. RUSS VICTORY FUND</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 23 / 2016  |
| Mailing Address 15 N PINCKNEY ST STE 200  |  | FEC Identification Number<br>C C00586180<br><b>Transaction ID : SB23.4909</b><br>Amount of Each Disbursement this Period<br>5000.00 |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53703   |
| Purpose of Disbursement<br>Contribution   | Category/<br>Type  |   |
| Candidate Name<br><b>RUSS VICTORY FUND</b>  | Memo Item <input type="checkbox"/>   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. SHAHEEN FOR SENATE</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 31 / 2016  |
| Mailing Address 105 N STATE STREET   |  | FEC Identification Number<br>C C00457325<br><b>Transaction ID : SB23.4924</b><br>Amount of Each Disbursement this Period<br>-500.00 |
| City<br>CONCORD  | State<br>NH  | Zip Code<br>03301   |
| Purpose of Disbursement<br>Voided Check from 6/2/2016  | Category/<br>Type  |   |
| Candidate Name<br><b>SHAHEEN, JEANNE, , ,</b>  | Memo Item <input type="checkbox"/>   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: NH District:  |  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 7000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

Full Name (Last, First, Middle Initial)

**A. SUOZZI 2016**

Mailing Address 410 JERICHO TURNPIKE  
SUITE 200

City JERICHO State NY Zip Code 11753

Purpose of Disbursement  
Contribution

Candidate Name  
**SUOZZI, THOMAS, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 03

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2016

FEC Identification Number

**C** C00607200

**Transaction ID : SB23.4919**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. TAMMY FOR ILLINOIS**

Mailing Address PO BOX 10793

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement  
Voided Check from 6/17/2016

Candidate Name  
**DUCKWORTH, L TAMMY, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IL District:

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

FEC Identification Number

**C** C00574889

**Transaction ID : SB23.4923**

Amount of Each Disbursement this Period

-1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TEXANS FOR PETE**

Mailing Address 10715 GULF DALE ST  
STE 235

City SAN ANTONIO State TX Zip Code 78216

Purpose of Disbursement  
Contribution

Candidate Name  
**GALLEGU, PETE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: TX District: 23

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2016

FEC Identification Number

**C** C00575043

**Transaction ID : SB23.4912**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**AMALGAMATED BANK PAC**

**A. VAL DEMINGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 536926

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement Contribution

Candidate Name  
**DEMINGS, VALDEZ 'VAL', , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: FL District: 10

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2016

FEC Identification Number

C C00590489

Transaction ID : SB23.4913

Amount of Each Disbursement this Period

2500.00

Memo Item

**B. ZEPHYR TEACHOUT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 491

City ROSENDALE State NY Zip Code 12472

Purpose of Disbursement Contribution

Candidate Name  
**TEACHOUT, ZEPHYR, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 19

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2016

FEC Identification Number

C C00608174

Transaction ID : SB23.4918

Amount of Each Disbursement this Period

2500.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

5000.00

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

38000.00