



**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

EMPIRE STATE VICTORY FUND

Report Covering the Period: From: 

M	M
1	0

D	D
0	7

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	61100.00	61100.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61100.00	61100.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	13176.91	13176.91
(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)).....	13176.91	13176.91
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	0.00	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
EMPIRE STATE VICTORY FUND

Report Covering the Period: From: 

M	M
1	0

D	D
0	7

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	61100.00	61100.00
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	61100.00	61100.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	61100.00	61100.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	61100.00	61100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	13176.91	13176.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	47923.09	47923.09
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	61100.00	61100.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	61100.00
25. SUBTOTAL (add Line 23 and Line 24).....	61100.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61100.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 24  
(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)  
**EMPIRE STATE VICTORY FUND**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mohamed Adam</p> <p>Mailing Address 3075 Richmond Terrace</p> <p>City State Zip Code <b>Staten Island NY 10303</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer May Ship Repair Contracting Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4203</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard T. Anderson</p> <p>Mailing Address 9 Highwive Circle</p> <p>City State Zip Code <b>Dobbs Ferry NY 10522</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer New York Building Conference Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4143</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Walter Beebe</p> <p>Mailing Address 243 West 12th Street</p> <p>City State Zip Code <b>New York NY 10014</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer NY Open Center Occupation Educator</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4153</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3900.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 6 / 24
	(check only one)	
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE VICTORY FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) Adam Blumenthal	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 324 West 23rd Street #7	<b>Transaction ID:</b> SA11AI.4141
	City State Zip Code New York NY 10011	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Blue Wolf Capital Private Equity	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Darcy Bradbury	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 1 Irving Place #G9E	<b>Transaction ID:</b> SA11AI.4199
	City State Zip Code New York NY 10003	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation The D.E. Shaw Group Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric R. Braverman	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 9
	Mailing Address 664 Route 518	<b>Transaction ID:</b> SA11AI.4165
	City State Zip Code Skillman NJ 08558	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Self-employed Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<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 7 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE VICTORY FUND**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Robert E. Brown</p> <p>Mailing Address 318 S. Railroad Street</p> <p>City State Zip Code <b>Staten Island NY 10312</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-employed Occupation Self-employed Attorney</p> <p>Receipt For: Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4167</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary Dixie Carter</p> <p>Mailing Address 24 Remsen Street #2</p> <p>City State Zip Code <b>Brooklyn NY 11201</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-employed Occupation Self-employed Writer</p> <p>Receipt For: Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4163</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Dana Comfort</p> <p>Mailing Address 37 Heatherbloom Road</p> <p>City State Zip Code <b>White Plains NY 10605</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer George Comfort &amp; Sons Occupation George Comfort &amp; Sons Real Estate Manager</p> <p>Receipt For: Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="float: right; border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 0 9</span></p> <p><b>Transaction ID: SA11AI.4169</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>

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

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

FOR LINE NUMBER: PAGE 8 / 24  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE VICTORY FUND**

**A.** Full Name (Last, First, Middle Initial)  
Athanassios Diplas  
Mailing Address 39 Dale Drive  
City Chatham State NJ Zip Code 07928  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Deutsche Bank Occupation Managing Director  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00  
Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4151  
Amount of Each Receipt this Period 4800.00

**B.** Full Name (Last, First, Middle Initial)  
Kumar Doraiswami  
Mailing Address 66 Millbrook Road  
City New Vernon State NJ Zip Code 07976  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Private Investor  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4157  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Douglaston Development LLC  
Mailing Address 40-09 235th Street  
City Little Neck State NY Zip Code 11363  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 11 / 10 / 2009  
Transaction ID: SA11AI.4133  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6800.00  
**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 9 / 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey E. Levine	Date of Receipt MM / DD / YYYY 11 / 10 / 2009
	Mailing Address 88 Wheatley Road	<b>Transaction ID:</b> SA11AI.4133.0
	City State Zip Code Old Westbury NY 11568	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Levine Builders Builder/Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	<b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mitchell Draizin	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 530 East 76th Street #27K	<b>Transaction ID:</b> SA11AI.4207
	City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation LVCA Inc. RE Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph Fama	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 36 Gallant Fox Road	<b>Transaction ID:</b> SA11AI.4205
	City State Zip Code Tinton Falls NJ 07724	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Empire Commercial Services Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 24  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Lina C. Fang

Mailing Address 171 Howard Avenue

City Staten Island State NY Zip Code 10301

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

Name of Employer Mei Chi Liquors Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00

Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4175  
Amount of Each Receipt this Period 4800.00

**B.** Full Name (Last, First, Middle Initial)  
Peter Fenty

Mailing Address 400 West 12th Street #6E

City New York State NY Zip Code 10014

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4217  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Michael T. Foglietta

Mailing Address 137 Sheep Pen Road

City Pittsgrove State NJ Zip Code 08318

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

Name of Employer Self-employed Occupation Construction

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00

Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4171  
Amount of Each Receipt this Period 4800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10600.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 24  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Gail Furman

Mailing Address 151 East 83rd Street

City State Zip Code  
New York NY 10028

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

Name of Employer Self-employed Occupation  
Self-employed Psychologist

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4139

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Louis Grandelli

Mailing Address 90 Broad Street

City State Zip Code  
New York NY 10044

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

Name of Employer Self-employed Occupation  
Self-employed Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 9

**Transaction ID:** SA11AI.4131

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
David J. Hernandez

Mailing Address 104 Manor Road

City State Zip Code  
Staten Island NY 10310

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

Name of Employer Self-employed Occupation  
Self-employed Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4173

Amount of Each Receipt this Period  
1000.00

**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 12 / 24  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Anne H. Hess

Mailing Address 214 East 18th Street

City State Zip Code  
New York NY 10003

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

Name of Employer Occupation  
Self-employed Consultant

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 9

**Transaction ID:** SA11AI.4135

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Leroy Holland

Mailing Address 12 Crown Street #E7

City State Zip Code  
Brooklyn NY 11225

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

Name of Employer Occupation  
Columbia University Physicians Assistant

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4177

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Howard Kagan

Mailing Address 1085 Park Avenue #9B

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Self-employed Private Investor

Receipt For: Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4209

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

**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 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Stephen Kempf

Mailing Address 24 Remsen Street #2

City State Zip Code  
Brooklyn NY 11201

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

Name of Employer Utilities & Industries Mgmt. Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4161  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Sarah Kovner

Mailing Address 27 West 67th Street

City State Zip Code  
New York NY 10023

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

Name of Employer Self-employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4211  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Arthur J. Kremer

Mailing Address 1111 Park Avenue #10G

City State Zip Code  
New York NY 10128

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

Name of Employer Ruskin Moscou Faltischek Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4179  
Amount of Each Receipt this Period: 1000.00

**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 14 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Cindi Leive  
Mailing Address 174 Warren Street  
City Brooklyn State NY Zip Code 11201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Conde Nast Occupation Editor-in-Chief Glamour  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4201  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
David Manning  
Mailing Address 25 Captains Drive  
City Islip State NY Zip Code 11751  
FEC ID number of contributing federal political committee. **C**  
Name of Employer M.J. Bradley & Associates Occupation Director  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4159  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Maria P. Markowitz  
Mailing Address 885 Park Avenue #15A  
City New York State NY Zip Code 10021  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 10 / 29 / 2009  
Transaction ID: SA11AI.4181  
Amount of Each Receipt this Period 2000.00

**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:	PAGE 15 / 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE VICTORY FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) Terence S. Meehan	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 39 Broadway 36th Floor	<b>Transaction ID:</b> SA11AI.4145
	City State Zip Code New York NY 10006	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Azimuth Investment Management Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Pao	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 10 Rows Whart PH1	<b>Transaction ID:</b> SA11AI.4155
	City State Zip Code Boston MA 02110	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Atlantis Energy Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) John R. Piscopo	Date of Receipt MM / DD / YYYY 10 / 29 / 2009
	Mailing Address 22 Seven Gables Road	<b>Transaction ID:</b> SA11AI.4137
	City State Zip Code Staten Island NY 10304	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Ciro Pizza Cafe General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6300.00</b>
<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: <span style="float: right;">PAGE 16 / 24</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**EMPIRE STATE VICTORY FUND**

<b>A.</b>	Full Name (Last, First, Middle Initial) Abdul Rehman	Date of Receipt
	Mailing Address 125 Douglas Road	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City State Zip Code Staten Island NY 10304	<b>Transaction ID:</b> SA11AI.4183
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Self-employed Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edmund Resor	Date of Receipt
	Mailing Address 16 W. 90th Street #1	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City State Zip Code New York NY 10024	<b>Transaction ID:</b> SA11AI.4147
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
	Name of Employer Self-employed Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="500.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kristen Roberts	Date of Receipt
	Mailing Address 29 Hulse Landing Road	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City State Zip Code Brick NJ 08723	<b>Transaction ID:</b> SA11AI.4185
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Information Requested Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
William C. Rudin

Mailing Address 345 Park Avenue

City State Zip Code  
New York NY 10154

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

Name of Employer Rudin Management Co. Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4187  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Deborah Mary Sale

Mailing Address 151 West 74th Street #9A

City State Zip Code  
New York NY 10023

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

Name of Employer Hospital for Special Surgery Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4189  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Raj K. Saverimuttu

Mailing Address 398 Gower Street

City State Zip Code  
Staten Island NY 10314

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

Name of Employer JPMorganChase Occupation Financial Services

Receipt For:  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 29 / 2009  
Transaction ID: SA11AI.4191  
Amount of Each Receipt this Period: 250.00

**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 18 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Paul Schnell

Mailing Address 9 West 84th Street

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Dreyfuss & Birke Ltd. President

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4149

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Daniel A. Simon

Mailing Address 45 West 60th Street #15A

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Retired Retired

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4219

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Jon Spencer

Mailing Address 67 Irving Place 12th Floor

City State Zip Code  
New York NY 10003

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

Name of Employer Occupation  
Gresham Investments LLC President

Receipt For: Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.4215

Amount of Each Receipt this Period  
1000.00

**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 19 / 24  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Jon Spencer

Mailing Address 67 Irving Place 12th Floor

City State Zip Code  
New York NY 10003

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

Name of Employer Gresham Investments LLC      Occupation President

Receipt For:      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	9

**Transaction ID:** SA11AI.4220

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Namasivayam Srikumar

Mailing Address 36 Hamilton Avenue

City State Zip Code  
Staten Island NY 10301

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

Name of Employer Self-employed      Occupation Accountant

Receipt For:      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	9

**Transaction ID:** SA11AI.4193

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Slawomir Tomkowski

Mailing Address 800 Lanidex Plaza #175

City State Zip Code  
Parsippany NJ 07054

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

Name of Employer Stebco Inc.      Occupation President

Receipt For:      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼      1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	9

**Transaction ID:** SA11AI.4195

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

**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 20 / 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.**

Full Name (Last, First, Middle Initial) Faiza Vardag-Muzaffar		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 288 Douglas Road		<b>Transaction ID:</b> SA11AI.4197
City Staten Island	State NY	Zip Code 10304
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self-employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Mark Zawisny		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 75 Greenway Drive		<b>Transaction ID:</b> SA11AI.4213
City Staten Island	State NY	Zip Code 10301
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Zawisny & Zawisny	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	61100.00

# 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)

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

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4113</p> <p>Date of Disbursement 11 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 774.20</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4126</p> <p>Date of Disbursement 11 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 529.30</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4127</p> <p>Date of Disbursement 11 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 79.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1382.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) Whitney W. Burns</p> <p>Mailing Address P.O. Box 1174</p> <p>City Springfield State VA Zip Code 22151</p> <p>Purpose of Disbursement Accounting &amp; Compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4112</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1250.00"/></p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Harvard Club of New York City</p> <p>Mailing Address 27 West 44th Street</p> <p>City New York State NY Zip Code 10036</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4128</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8101.04"/></p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael Andrews Audio Visual Services</p> <p>Mailing Address 625 West 55th Street 3rd Floor</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Audio Visual Equipment &amp; Setup</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4124</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="958.10"/></p> <p>Category/Type</p>

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) MIKE MCMAHON FOR CONGRESS</p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement Audio Visual Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4115</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 1031.24</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Autocue QTV</p> <p>Mailing Address 306 5th Avenue 3rd Floor</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Audio Visual Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4115.0</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 919.38</p> <p>[MEMO ITEM]</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rod Morata Photography</p> <p>Mailing Address 160 Wirt Avenue</p> <p>City Staten Island State NY Zip Code 10309</p> <p>Purpose of Disbursement Photography</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.4122</p> <p>Date of Disbursement MM / DD / YYYY 11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1331.24</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>13022.88</p>

**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 / 24

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

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NAME OF COMMITTEE (In Full)  
EMPIRE STATE VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
MIKE MCMAHON FOR CONGRESS

Mailing Address 66 Arnold Street

City Staten Island State NY Zip Code 10301

Purpose of Disbursement  
Joint Fundraising Proceeds

Candidate Name  
MICHAEL E. MCMAHON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Transaction ID: SB18.4111

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

26785.16

**B.** Full Name (Last, First, Middle Initial)  
SCOTT MURPHY FOR CONGRESS

Mailing Address 615 Glen Street

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement  
Joint Fundraising Proceeds

Candidate Name  
SCOTT M MURPHY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: NY District: 20

Transaction ID: SB18.4110

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

21137.93

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

47923.09

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

47923.09