

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

RESHMA FOR CONGRESS

ADDRESS (number and street) 50 AVE A

#5C

Check if different than previously reported. (ACC)

NEW YORK NY 10009

2. **FEC IDENTIFICATION NUMBER** C00469866

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NY 14

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 01 01 2011 through 03 31 2011

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

Type or Print Name of Treasurer Trina Dasgupta

Signature of Treasurer Electronically Filed by Trina Dasgupta Date 04 13 2011

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

RESHMA FOR CONGRESS

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	12850.00	12850.00
(b) Total Contribution Refunds (from Line 20(d)).....	25700.00	137276.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-12850.00	-124426.00
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	13009.30	23894.61
(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)).....	13009.30	23894.61
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	28912.52	
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	30000.00	

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
 RESHMA FOR CONGRESS

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	12850.00	12850.00
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	12850.00	12850.00
(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))	12850.00	12850.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	12850.00	12850.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13009.30	23894.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	25700.00	137276.00
(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)).....	25700.00	137276.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	38709.30	161170.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	54771.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	12850.00
25. SUBTOTAL (add Line 23 and Line 24).....	67621.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	38709.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	28912.52

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

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

FOR LINE NUMBER: PAGE 5 / 13
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
RESHMA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Preethi Krishna
Mailing Address 332 East 69th St
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Goldman Sachs Occupation Banker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 02 / 04 / 2011
Transaction ID: SA11AI.4138
Amount of Each Receipt this Period 2400.00
2010 Primary Debt

B. Full Name (Last, First, Middle Initial)
Ajay Mehta
Mailing Address 22 David Scott Dr
City Wayne State NJ Zip Code 07470
FEC ID number of contributing federal political committee. **C**
Name of Employer Easylink Services Intl. Occupation Engineer
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 01 / 25 / 2011
Transaction ID: SA11AI.4132
Amount of Each Receipt this Period 2400.00
2010 Primary Debt

C. Full Name (Last, First, Middle Initial)
Asha Mehta
Mailing Address 37 Kennedy Dr
City Waldwick State NJ Zip Code 07463
FEC ID number of contributing federal political committee. **C**
Name of Employer Ramapo College of New Jersey Occupation Adjunct Professor
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 02 / 01 / 2011
Transaction ID: SA11AI.4136
Amount of Each Receipt this Period 2400.00
2010 Primary Debt

SUBTOTAL of Receipts This Page (optional) ► 7200.00
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 6 / 13
	<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)
RESHMA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Dashrath Mehta	Date of Receipt MM / DD / YYYY 01 / 25 / 2011
	Mailing Address 37 Kennedy Dr	Transaction ID: SA11AI.4130
	City State Zip Code Waldwick NJ 07463	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	2010 Primary Debt
	Name of Employer Retired Occupation Accountant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) Kane Sarhan	Date of Receipt MM / DD / YYYY 02 / 10 / 2011
	Mailing Address 32 Havemeyer St #2B	Transaction ID: SA11AI.4140
	City State Zip Code Brooklyn NY 11211	Amount of Each Receipt this Period 2250.00
	FEC ID number of contributing federal political committee. C	2010 Primary Debt
	Name of Employer buzzd Inc Occupation Creative Director Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2250.00	

C.	Full Name (Last, First, Middle Initial) Sunaina Singh	Date of Receipt MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 141 Cumberland Ct	Transaction ID: SA11AI.4142
	City State Zip Code Paramus NJ 07652	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	2010 Primary Debt
	Name of Employer None Occupation Homemaker Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	5650.00
TOTAL This Period (last page this line number only)	12850.00

**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)
RESHMA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Hiltzik Strategies	Transaction ID: SB17.4168 Date of Disbursement 03 / 02 / 2011
	Mailing Address 381 Park Avenue South Suite 1216	Amount of Each Disbursement this Period 5000.00
	City New York State NY Zip Code 10016	
	Purpose of Disbursement Communications Consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) NGP Software	Transaction ID: SB17.4134 Date of Disbursement 01 / 31 / 2011
	Mailing Address 1101 15th Street, NW, Suite 500	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Database Software	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB17.4157 Date of Disbursement 02 / 10 / 2011
	Mailing Address 400 Crown Colony Dr	Amount of Each Disbursement this Period 197.50
	City Quincy State MA Zip Code 02169	
	Purpose of Disbursement Payroll Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)

6197.50

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)
RESHMA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Sandler, Reiff & Young

Transaction ID: SB17.4165
Date of Disbursement

Mailing Address 300 M St. SE
Ste 1102

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	1	1

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Legal Consulting Fee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
West Wing Writers

Transaction ID: SB17.4170
Date of Disbursement

Mailing Address 1150 Connecticut Ave. NW
Suite 505

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	1

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

4500.00

Purpose of Disbursement
Strategy Consulting Fee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

12697.50

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

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NAME OF COMMITTEE (In Full)
RESHMA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Nasser Ahmad	Transaction ID: SB20A.4107 Date of Disbursement 01 / 05 / 2011
	Mailing Address 333 Greenwich St	Amount of Each Disbursement this Period 2400.00
	City New York State NY Zip Code 10013	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Nalin Bhargava	Transaction ID: SB20A.4115 Date of Disbursement 01 / 06 / 2011
	Mailing Address 1 Union Sq S 23E	Amount of Each Disbursement this Period 2400.00
	City New York State NY Zip Code 10003	
	Purpose of Disbursement Contribution Refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Sukey Caceres	Transaction ID: SB20A.4121 Date of Disbursement 01 / 10 / 2011
	Mailing Address 20 W 55th St 5th FL	Amount of Each Disbursement this Period 2400.00
	City New York State NY Zip Code 10019	
	Purpose of Disbursement Contribution Refunds Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7200.00
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)

PAGE 10 / 13

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

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NAME OF COMMITTEE (In Full)
RESHMA FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Maneesh Goyal</p> <p>Mailing Address 60 E 13th St</p> <p>City New York State NY Zip Code 10003</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4118</p> <p>Date of Disbursement 01 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cathy Lasry</p> <p>Mailing Address 4 E 74th St</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4146</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Marc Lasry</p> <p>Mailing Address 4 E 74th St</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4144</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7200.00

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

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NAME OF COMMITTEE (In Full)
RESHMA FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Diane Max</p> <p>Mailing Address 1115 5th Ave</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4160</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2400.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Romita Shetty</p> <p>Mailing Address 333 Greenwich St</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4110</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <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="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2400.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Gagan Singh</p> <p>Mailing Address 141 Cumberland Ct</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Contribution Refund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB20A.4125</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5800.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></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 12 / 13

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

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NAME OF COMMITTEE (In Full)
RESHMA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Lacey Tisch-Sidney

Mailing Address 106 Central Park S

City State Zip Code
New York NY 10019

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB20A.4153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE C (FEC Form 3)

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

PAGE 13 / 13

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

LOANS

NAME OF COMMITTEE (In Full)
 RESHMA FOR CONGRESS

Transaction ID: SC/10.4189

LOAN SOURCE Full Name (Last, First, Middle Initial) Reshma Saujani - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 50 AVE A #5C	
City NEW YORK State NY ZIP Code 10009	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 9 D D 0 7 Y Y Y Y 2 0 1 0	12/31/2012	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	30000.00
TOTALS This Period (last page in this line only)	30000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.