

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Maloney for Congress

ADDRESS (number and street)

49 East 92nd Street

Check if different than previously reported. (ACC)

New York

NY

10128

2. FEC IDENTIFICATION NUMBER ▼

C C00273169

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 Melissa Mendez

Signature of Treasurer Melissa Mendez

*[Electronically Filed]*

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Maloney for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	186522.05	381033.46
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	186522.05	380983.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	140327.37	356569.89
(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)).....	140327.37	356569.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	551913.35	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Maloney for Congress**

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

<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		
(i) Itemized (use Schedule A).....	69440.00	262860.00
(ii) Unitemized.....	2735.00	10617.00
(iii) TOTAL of contributions from individuals ▶	72175.00	142986.41
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	114347.05	238047.05
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	186522.05	381033.46
<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>	186522.05	381033.46

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	140327.37	356569.89
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 .....	0.00	50.00
(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	50.00
21. OTHER DISBURSEMENTS .....	35000.00	35000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	175327.37	391619.89

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	540718.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	186522.05
25. SUBTOTAL (add Line 23 and Line 24).....	727240.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	175327.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	551913.35

**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 5 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 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)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Waffa Abboud</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2013	
Mailing Address 2840 Rosebud Ave		<b>Transaction ID : C4815392</b>	
City Merrick	State NY	Zip Code 11566	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Human First	Occupation Chief Executive Officer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Edison Akhavan</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2013	
Mailing Address 20 E 46th Street Room 500		<b>Transaction ID : C4807417</b>	
City New York	State NY	Zip Code 10017	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Ryan Gems	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>C. Hercules Argyriou</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2013	
Mailing Address 1217 83rd Street		<b>Transaction ID : C4815527</b>	
City Brooklyn	State NY	Zip Code 11228	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Mega Contracting Inc.	Occupation Vice President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Panayiotis A. Baltatzis**

Mailing Address 8113 Harford Rd

City State Zip Code  
Parkville MD 21234-5790

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

Name of Employer Occupation  
SELF PHYSYCIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 09 / 2013

**Transaction ID : C4731488**

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
**Panayiotis A. Baltatzis**

Mailing Address 8113 Harford Rd

City State Zip Code  
Parkville MD 21234-5790

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

Name of Employer Occupation  
SELF PHYSYCIAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 13 / 2013

**Transaction ID : C4808285**

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
**Masood Baniliv**

Mailing Address 47 Berkshire Road

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Self Employed Baniliv Rug Corp.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2013

**Transaction ID : C4807413**

Amount of Each Receipt this Period  
750.00

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

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

790.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Wayne Bardin**

Mailing Address 19 East 88th St  
Apt. 10E

City New York State NY Zip Code 10128

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

Name of Employer Population Council Occupation Research Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2013

**Transaction ID : C4828420**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Teresa B. Bazemore**

Mailing Address 324 Fawn Hill Lane

City Penn Valley State PA Zip Code 19072

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

Name of Employer Radian Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : C4769688**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joel Bergstein**

Mailing Address 301 Route 17 North  
9th Floor

City Rutherford State NJ Zip Code 07070

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

Name of Employer Lincoln Equities Group, LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2013

**Transaction ID : C4815349**

Amount of Each Receipt this Period  
2500.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas H Boggs, Jr.**

Mailing Address 2550 M St NW

City Washington State DC Zip Code 20037-1309

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

Name of Employer Patton Boggs LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2013

**Transaction ID : C4775346**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Phillip W. Bracken**

Mailing Address Radian Guaranty Inc.  
16024 Manchester Road, Suite 200

City Ellisville State MO Zip Code 63011

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

Name of Employer Radian Guaranty Inc. Occupation Chief Policy Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C4769674**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Brian J. Cabrera**

Mailing Address 1798 Franklin Ave

City East Meadow State NY Zip Code 11554-2920

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

Name of Employer AAA Gun & Pawn Shop Occupation Pawnbroker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : C4803438**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles E. Callahan III**

Mailing Address 19933 23rd Avenue

City State Zip Code  
Whitestone NY 11357-4123

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

Name of Employer Occupation  
Plaza Business Institute Provost

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C4802450**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth K. Callahan**

Mailing Address 9 Arleigh Rd

City State Zip Code  
Little Neck NY 11363

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

Name of Employer Occupation  
Plaza College Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C4802452**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven M. Champlin**

Mailing Address 4800 Dexter Street

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Durbenstein Group Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C4819246**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward J Davis**

Mailing Address 320 West 76th Street Apt. 9F

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Attorney Davis Wright Tremaine LLP.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2013

**Transaction ID : C4813384**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeremy Diamond**

Mailing Address 17 East 96th Street Apt. 9-A

City State Zip Code  
New York NY 10128-0783

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

Name of Employer Occupation  
Annaly Capital Management Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C4769687**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Moustafa M. Elshekh**

Mailing Address 34-23 Steinway Street Suite 600

City State Zip Code  
Long Island City NY 11101

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

Name of Employer Occupation  
EIHAB Director of PR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815509**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dwight A Fettig**

Mailing Address 8506 Postoak Rd

City Potomac State MD Zip Code 20854-3547

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

Name of Employer Porterfield, Lowenthal & Fettig, LLC Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C4821640**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Alan B. Friedberg**

Mailing Address 300 East 56th Street

City New York State NY Zip Code 10022

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

Name of Employer Wilson Elser Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : C4829234**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Vincent E Frillici**

Mailing Address 5432 32nd St NW

City Washington State DC Zip Code 20015-1304

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

Name of Employer Patton Boggs LLP Occupation Senior Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2013

**Transaction ID : C4774093**

Amount of Each Receipt this Period  
 500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Keith Funkhouser**

Mailing Address **PO Box 83**

City **New Creek** State **WV** Zip Code **26743-0083**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 23 / 2013**

**Transaction ID : C4813702**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edward I. Gersh**

Mailing Address **150 E 69th St # 27M**

City **New York** State **NY** Zip Code **10021-5704**

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

Name of Employer **West Hills Day Camp** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 07 / 2013**

**Transaction ID : C4812683**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jill Goldstein**

Mailing Address **1 Canterbury Lane**

City **Montebello** State **NY** Zip Code **10901**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**06 / 05 / 2013**

**Transaction ID : C4803398**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arthur N. Gualtieri</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2013
Mailing Address 20-59 43rd Street		<b>Transaction ID : C4817408</b>
City Astoria	State Zip Code NY 11105	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer Self-employed	Occupation Health Care Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Amir Hadjibay</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 36 Pond Road		<b>Transaction ID : C4807421</b>
City Great Neck	State Zip Code NY 11024	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 750.00
Name of Employer Consultant	Occupation Self Employed	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>C. Khosrow Hakimian</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 123 Hicks Lane		<b>Transaction ID : C4807414</b>
City Great Neck	State Zip Code NY 11024	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 750.00
Name of Employer Best Efforts	Occupation Best Efforts	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mehran Hakimian**

Mailing Address 1001 Avenue Of The Americas

City State Zip Code  
New York NY 10018

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

Name of Employer Occupation  
American Jewelry Designs President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : C4807420**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Laurence E Harris**

Mailing Address 10009 Chartwell Manor Ct

City State Zip Code  
Potomac MD 20854-5441

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

Name of Employer Occupation  
Patton Boggs Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2013

**Transaction ID : C4801732**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Fern Hurst**

Mailing Address 1060 5th Ave

City State Zip Code  
New York NY 10128-0104

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : C4807223**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

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

Mailing Address 63 Via Los Altos

City State Zip Code  
Belvedere Tiburon CA 94920

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

Name of Employer Occupation  
Best Efforts Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C4769690**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Fred T Isquith Esq.**

Mailing Address 103 E 84th St

City State Zip Code  
New York NY 10028-0937

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

Name of Employer Occupation  
Wolf Haldenstein Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : C4807306**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Stella Kokolis**

Mailing Address 452 75th Street

City State Zip Code  
Brooklyn NY 11209

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

Name of Employer Occupation  
Federation of Teachers Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815537**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sophia Konstantinides**

Mailing Address 10 Merrivale Road

City State Zip Code  
Great Neck NY 11021-4915

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

Name of Employer Occupation  
Justice For Cypress Inc. Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815367**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**David Kordvani**

Mailing Address 9 East Road

City State Zip Code  
Great Neck NY 11024

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

Name of Employer Occupation  
A&D Gem Excutive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2013

**Transaction ID : C4807412**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Matthew Kulkin**

Mailing Address 1511 N Rolfe St  
Apt. 102

City State Zip Code  
Arlington VA 22209-2880

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

Name of Employer Occupation  
Patton Boggs Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2013

**Transaction ID : C4775313**

Amount of Each Receipt this Period  
250.00

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

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

2250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Lebwohl**

Mailing Address **One Gustave L. Levy Place**  
**Box 1048**

City **New York** State **NY** Zip Code **10029**

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

Name of Employer **Mount Sinai Medical Center** Occupation **Chairman, Department of Dermatology**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

**Transaction ID : C4822369**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Susan Levkoff**

Mailing Address **27 North Moore Street**  
**Apt. 7A**

City **New York** State **NY** Zip Code **10013**

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

Name of Employer **Chelsea Town** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 10 / 2013**

**Transaction ID : C4732309**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Loida Nicolas Lewis**

Mailing Address **115 E 57th St**  
**Ste 1430**

City **New York** State **NY** Zip Code **10022-2110**

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

Name of Employer **TLC Beatrice, LLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2013**

**Transaction ID : C4815207**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Monica Livian</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2013	
Mailing Address 7 Lighthouse Rd		<b>Transaction ID : C4807411</b>	
City Great Neck	State NY	Zip Code 11024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Self	Occupation Fund-Raising Professional		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph M Mattone Sr</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2013	
Mailing Address 37-20 Renatta Place		<b>Transaction ID : C4817445</b>	
City Douglaston	State NY	Zip Code 11363	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Real Estate Developer	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>C. Blaine Messinger</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2013	
Mailing Address 301 E. 149th st.		<b>Transaction ID : C4803395</b>	
City New York	State NY	Zip Code 10451	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer New York Pawnbrokers	Occupation Pawnbroker Executive		
Receipt For: 2014 <input checked="" 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).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 19 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John R. Miller**

Mailing Address 5100 Paradise Dr.

City Corte Madera	State CA	Zip Code 94925
----------------------	-------------	-------------------

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828405**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Eric M. Modell**

Mailing Address Modell Financial  
21 West 47th Street, Suite 500

City New York	State NY	Zip Code 10036
------------------	-------------	-------------------

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

Name of Employer Modell Financial	Occupation Pawnbroker Exectuive
--------------------------------------	------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C4812699**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Gerald Modell**

Mailing Address 983 Park Avenue

City New York	State NY	Zip Code 10028
------------------	-------------	-------------------

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

Name of Employer Modell Financial Int.	Occupation President
---	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C4812694**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William B Montalto**

Mailing Address 642 N Armistead St

City State Zip Code  
Alexandria VA 22312-2928

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

Name of Employer Occupation  
Retired Congressional staffer Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C4821451**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kate Moss**

Mailing Address 1626 Foxhall Rd., NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
The Kate Moss Company Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : C4802479**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nikos Mouyiaris**

Mailing Address Mana Products  
32-02 Queens Boulevard

City State Zip Code  
Astoria NY 11101

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

Name of Employer Occupation  
Mana Products President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815324**

Amount of Each Receipt this Period  
2600.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nikos Mouyiaris**

Mailing Address Mana Products  
32-02 Queens Boulevard

City Astoria State NY Zip Code 11101

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

Name of Employer Mana Products Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815325**

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
**Gregory Q Murphy**

Mailing Address 81 Columbia Hts  
Apt 35

City Brooklyn State NY Zip Code 11201-1653

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

Name of Employer Skanska Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2013

**Transaction ID : C4792808**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter Phillips**

Mailing Address 37-19 Broadway 2FI

City Astoria State NY Zip Code 11103

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4762162**

Amount of Each Receipt this Period  
500.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jason Pitcock**

Mailing Address 3039 16th St NW  
PH 2

City Washington State DC Zip Code 20009-7400

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

Name of Employer Porterfield, Lowenthal & Fettig Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

**Transaction ID : C4821616**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael D. Rienzi**

Mailing Address 61-77 77th Street

City Middle Village State NY Zip Code 11379

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

Name of Employer Rienzi & Sons Inc Occupation Owner/Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2013

**Transaction ID : C4811178**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael D. Rienzi**

Mailing Address 61-77 77th Street

City Middle Village State NY Zip Code 11379

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

Name of Employer Rienzi & Sons Inc Occupation Owner/Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 18 / 2013

**Transaction ID : C4834169**

Amount of Each Receipt this Period  
 2400.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eric I. Robins**

Mailing Address 1616 18th Street  
Apt. 706

City Washington State DC Zip Code 20009

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

Name of Employer Williams & Jensen Occupation Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C4819255**

Amount of Each Receipt this Period  
 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Hal G. Rosenbluth**

Mailing Address 151 Winchester Dr

City Yonkers State NY Zip Code 10710-2322

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

Name of Employer Kaufman Astoria Studios Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : C4783569**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Hal G. Rosenbluth**

Mailing Address 151 Winchester Dr

City Yonkers State NY Zip Code 10710-2322

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

Name of Employer Kaufman Astoria Studios Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : C4799437**

Amount of Each Receipt this Period  
 2400.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

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

Mailing Address 8920 Edgewood Drive

City Gaithersburg State MD Zip Code 20877

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

Name of Employer McDermott Will & Emery Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C4802468**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sybil Shainwald**

Mailing Address 955 5th Ave Apt 15B

City New York State NY Zip Code 10075-1747

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

Name of Employer Sybil Shainwald, PC Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2013

**Transaction ID : C4732308**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jordan Tabach-Bank**

Mailing Address Best Efforts

City Best Efforts State Zip Code

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2013

**Transaction ID : C4812698**

Amount of Each Receipt this Period  
500.00

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

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

4000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**George R. Tyler**

Mailing Address 3120 North Monroe St

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828398**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Neil Underberg**

Mailing Address 480 Park Avenue  
Apt. #3B

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Rosenberg & Estis Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : C4802476**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Efstathios Valiotis**

Mailing Address 2818 - 31St Stree  
Suite 201

City State Zip Code  
Astoria NY 11102

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

Name of Employer Occupation  
Alma Realty CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815365**

Amount of Each Receipt this Period  
2600.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 106
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Efstathios Valiotis**

Mailing Address 2818 - 31St Stree  
Suite 201

City Astoria State NY Zip Code 11102

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

Name of Employer Alma Realty Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : C4815366**

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
**Carolyn B. Walsh**

Mailing Address 7723 Tomlison Ave

City Cabin John State MD Zip Code 20818

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802482**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Eli Zabar**

Mailing Address 52 East 92nd Street

City New York State NY Zip Code 10128

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

Name of Employer Eli's Manhattan & Vinegar Factory Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : C4812619**

Amount of Each Receipt this Period  
2500.00

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

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

5150.00

69440.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AFLAC PAC**

Mailing Address Worldwide Headquarters  
1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : C4802481**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 Massachusetts Ave. NW  
8th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828419**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1350 I Street NW  
Suite 880

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802488**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Association For Justice PAC**

Mailing Address 777 6th Street, NW  
Suite 200

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 21 / 2013

**Transaction ID : C4802491**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION BANKPAC**

Mailing Address 1120 CONN. AVE., NW SUITE 851

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2013

**Transaction ID : C4819254**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**American Council of Life Insurers**

Mailing Address 101 Constitution Ave., NW  
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 04 / 2013

**Transaction ID : C4802462**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 North Fairfax St.

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2013

**Transaction ID : C4803373**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE

Mailing Address P. O. Drawer 938

City Thibodaux State LA Zip Code 70302

FEC ID number of contributing federal political committee. **C** C00081414

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C4819138**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
American Sugarbeet Growers Association PAC

Mailing Address 1156 15TH STREET NW  
SUITE 1101

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00167684

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2013

**Transaction ID : C4732292**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATCH ASSOC POLITICAL ACTION COMM**

Mailing Address 1201 PENNSYLVANIA AVE NW  
P O BOX 464

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00265652

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4761691**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)**

Mailing Address 2901 Telestar Court 4th Floor

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 28 / 2013

**Transaction ID : C4819242**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**BLACKROCK CAPITAL MANAGEMENT INC. POLITICAL ACTION**

Mailing Address 40 East 52nd Street

City New York State NY Zip Code 10022

FEC ID number of contributing federal political committee. **C** C00479246

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 19 / 2013

**Transaction ID : C4744859**

Amount of Each Receipt this Period  
 1500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
BROOKE HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY SEPARATE SEGREGATED FUND (JACKSON NATIONAL PAC)

**A.** Mailing Address 1 CORPORATE WAY

City: Lansing State: MI Zip Code: 48951

FEC ID number of contributing federal political committee: **C** C00254953

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 24 / 2013

**Transaction ID : C4802465**

Amount of Each Receipt this Period: 1000.00

Full Name (Last, First, Middle Initial)  
**Capital One Financial Corp. Assoc. Political Fund**

**B.** Mailing Address 1680 Capital One Drive  
Attn: 19050-1204

City: Mc Lean State: VA Zip Code: 22102

FEC ID number of contributing federal political committee: **C** C00326595

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 15 / 2013

**Transaction ID : C4802473**

Amount of Each Receipt this Period: 1000.00

Full Name (Last, First, Middle Initial)  
**COMPASS BANCSHARES, INC PAC**

**C.** Mailing Address P.O. BOX 10566

City: Birmingham State: AL Zip Code: 35205

FEC ID number of contributing federal political committee: **C** C00142596

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 20 / 2013

**Transaction ID : C4812670**

Amount of Each Receipt this Period: 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**COUNCIL OF INSURANCE AGENTS & BROKERS PAC**

Mailing Address 701 Pennsylvania Avenue N.W. -Suit

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

FEC ID number of contributing federal political committee. **C** C00039578

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802496**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**COVINGTON AND BURLING LLP PAC**

Mailing Address 1201 Pennsylvania Avenue, NW

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

FEC ID number of contributing federal political committee. **C** C00462630

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802493**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA**

Mailing Address 805 15TH STREET NW SUITE 300

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007880

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2013

**Transaction ID : C4802440**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION (NADA)		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2013
A. Mailing Address 8400 WESTPARK DRIVE		Transaction ID : C4815449
City MCLEAN	State VA	
FEC ID number of contributing federal political committee. C C00040998		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) DELOITTE FEDERAL POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 19 / 2013
B. Mailing Address P.O. Box 365		Transaction ID : C4745744
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00211318		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

Full Name (Last, First, Middle Initial) DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2013
C. Mailing Address 601 13TH ST NW SUITE 580 SOUTH		Transaction ID : C4802484
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00497917		Amount of Each Receipt this Period 1850.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC**

Mailing Address 601 13TH ST NW SUITE 580 SOUTH

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00497917**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C4802497**

Amount of Each Receipt this Period  
650.00

\* In-Kind: FR Catering Cost

**B.** Full Name (Last, First, Middle Initial)  
**ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (ECPAC)**

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C C00113811**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2013

**Transaction ID : C4817358**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2013

**Transaction ID : C4739183**

Amount of Each Receipt this Period  
2000.00

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

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

5150.00

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

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

FOR LINE NUMBER: PAGE 35 OF 106  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
FEDERAL BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP, INC. (PNC PAC - FED)

A. Mailing Address 49 FIFTH AVE., 21ST FLOOR

City State Zip Code  
Pittsburgh PA 15222

FEC ID number of contributing federal political committee. **C C00186064**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2013

Transaction ID : C4802448

Amount of Each Receipt this Period  
 2000.00

B. Full Name (Last, First, Middle Initial)  
**FLORIDA SUGAR CANE LEAGUE PAC**

Mailing Address Attn.: Ryan Weston  
1301 Pennsylvania Ave NW Ste 401

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00012328**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2013

Transaction ID : C4703520

Amount of Each Receipt this Period  
 1000.00

C. Full Name (Last, First, Middle Initial)  
**GENWORTH FINANCIAL INC PAC**

Mailing Address 6620 W. Broad Street

City State Zip Code  
Richmond VA 23230

FEC ID number of contributing federal political committee. **C C00404194**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2013

Transaction ID : C4812682

Amount of Each Receipt this Period  
 1000.00

**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 36 OF 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GOLDMAN SACHS GROUP, INC. PAC**

Mailing Address 101 Constitution Avenue, NW  
Suite 1000E

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4760867**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC**

Mailing Address 1900 M Street NW  
Suite 300

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00408260**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : C4802474**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GREAT LAKES SUGARBEET GROWERS PAC**

Mailing Address 4800 FASHION SQUARE BLVD  
#300 PLAZA N

City Saginaw State MI Zip Code 48604

FEC ID number of contributing federal political committee. **C C00384354**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4760900**

Amount of Each Receipt this Period  
1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**HOGAN LOVELLS POLITICAL ACTION COMMITTEE**

Mailing Address **555 THIRTEENTH STREET NW 8TH FL  
WEST TOWER**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00261339**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**05 / 01 / 2013**

**Transaction ID : C4763621**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**ING AMERICA INSURANCE HOLDINGS INC POLITICAL ACTION COMMITTEE (ING US PAC)**

Mailing Address **One Orange Way - C1N  
Legal P-3**

City **Windsor** State **CT** Zip Code **06095**

FEC ID number of contributing federal political committee. **C C00184028**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : C4736190**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENT**

Mailing Address **1750 New York Ave. NW  
Suite 400**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**04 / 10 / 2013**

**Transaction ID : C4732290**

Amount of Each Receipt this Period  
**2500.00**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INTERCONTINENTAL EXCHANGE INC PAC**

Mailing Address RiverEdge Pkwy Ste 500

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C C00443168**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : C4799464**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**International Brotherhood of Electrical Workers**

Mailing Address 900 Seventh Street, N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00027342**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 10 / 2013

**Transaction ID : C4732302**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL SECURITIES EXCHANGE PAC**

Mailing Address 60 Broad Street  
26th Floor

City New York State NY Zip Code 10004

FEC ID number of contributing federal political committee. **C C00382226**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 04 / 2013

**Transaction ID : C4799480**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 39 OF 106  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 15 POLITICAL ACTION COMMITTEE

Mailing Address 265 WEST 14TH STREET

City NEW YORK State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C** C00163956

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : C4817406**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Collins**

Mailing Address 5961 Searl Terrace

City Bethesda State MD Zip Code 20816

FEC ID number of contributing federal political committee. **C** C00431858

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : C4799473**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)**

Mailing Address 1601 K Street, NW Suite 500

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 15 / 2013

**Transaction ID : C4802475**

Amount of Each Receipt this Period  
2000.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**KeyCorp Political Action Committee**

Mailing Address 127 Public Square

City Cleveland State OH Zip Code 44114

FEC ID number of contributing federal political committee. **C** C00073155

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : C4812675**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address P.O. Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 10 / 2013

**Transaction ID : C4732295**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC**

Mailing Address P.O. Box 18254

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4761633**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
LOCAL 891 INTERNATIONAL UNION OF OPERATING ENGINEERS ENGINEERS POLITICAL EDUCATION COMMITTEE

A. Mailing Address 63 FLUSHING AVE, BLDG. 292 SUITE 4

City	State	Zip Code
Brooklyn	NY	11205

FEC ID number of contributing federal political committee. **C** C00457184

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2013

Transaction ID : C4724299

Amount of Each Receipt this Period  
750.00

B. Full Name (Last, First, Middle Initial)  
**M&T Bank PAC**

Mailing Address One Fountain Plaza

City	State	Zip Code
Buffalo	NY	14203

FEC ID number of contributing federal political committee. **C** C00137273

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013

Transaction ID : C4828404

Amount of Each Receipt this Period  
1000.00

C. Full Name (Last, First, Middle Initial)  
**Mechanical Contractors Assn. PAC**

Mailing Address 1385 PICCARD DRIVE

City	State	Zip Code
ROCKVILLE	MD	20850

FEC ID number of contributing federal political committee. **C** C00343590

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2013

Transaction ID : C4763596

Amount of Each Receipt this Period  
5000.00

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

6750.00

**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 42 OF 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

A. Full Name (Last, First, Middle Initial)  
**Metlife Inc. Employees Political Participation Fund**

Mailing Address 1095 Avenue of the Americas  
Area 4D

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C C00040923**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2013

**Transaction ID : C4802389**

Amount of Each Receipt this Period  
1000.00

B. Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Mailing Address 7525 RED RIVER ROAD

City State Zip Code  
Wahpeton ND 58075

FEC ID number of contributing federal political committee. **C C00164939**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 12 / 2013

**Transaction ID : C4736191**

Amount of Each Receipt this Period  
1000.00

C. Full Name (Last, First, Middle Initial)  
**MORTGAGE INSURANCE COMPANIES OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1425 K ST., NWSUITE 210

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C C00113258**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 01 / 2013

**Transaction ID : C4763602**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
NAPUS PAC FOR POSTMASTERS (FKA POLITICAL EDUCATION FOR POSTMASTERS)

Mailing Address 8 HERBERT STREET

City State Zip Code  
ALEXANDRIA VA 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802503**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
NARAL PRO-CHOICE AMERICA PAC

Mailing Address 1156 15th Street, NW  
Suite 700

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00079541

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4823099**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
National Association of Federal Credit Unions PAC

Mailing Address 3138 North Tenth Street

City State Zip Code  
Arlington VA 22201-2149

FEC ID number of contributing federal political committee. **C** C00040659

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802494**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 44 OF 106  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

A. Mailing Address 2901 TELESTAR COURT

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2013

Transaction ID : C4802379

Amount of Each Receipt this Period  
 2500.00

B. Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF POSTAL SUPERVISORS POLITIC

Mailing Address 1727 King Street Suite 400

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00092957

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2013

Transaction ID : C4802492

Amount of Each Receipt this Period  
 1000.00

C. Full Name (Last, First, Middle Initial)  
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M Street NW Suite 540

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : C4799472

Amount of Each Receipt this Period  
 1000.00

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

4500.00

**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 45 OF 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL PAWNBROKERS ASSOCIATION INC POLITICAL ACT**

Mailing Address **PO BOX 508**

City **Keller** State **TX** Zip Code **76244**

FEC ID number of contributing federal political committee. **C C00307397**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 17 / 2013**

**Transaction ID : C4812695**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL SHORTHAND REPORTERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **8224 OLD COURTHOUSE ROAD**

City **Vienna** State **VA** Zip Code **22182**

FEC ID number of contributing federal political committee. **C C00146506**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 24 / 2013**

**Transaction ID : C4802444**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**PATTON BOGGS PAC**

Mailing Address **2550 M Street N.W.**

City **Washington** State **DC** Zip Code **20037**

FEC ID number of contributing federal political committee. **C C00401083**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 21 / 2013**

**Transaction ID : C4802495**

Amount of Each Receipt this Period  
 2500.00

Amount of Each Receipt this Period  
 2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A. Full Name (Last, First, Middle Initial)  
PITNEY BOWES INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1 ELMCROFT ROADMSC 63-20

City Stamford	State CT	Zip Code 06926
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00339499

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2013

**Transaction ID : C4802501**

Amount of Each Receipt this Period

2000.00

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

Mailing Address 700 13TH STREET, NWSUITE 600

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

FEC ID number of contributing federal political committee. **C** C00441303

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C4769693**

Amount of Each Receipt this Period

1000.00

**C. Full Name (Last, First, Middle Initial)  
POPULAR INC PAC**

Mailing Address 700 13TH STREET, NWSUITE 600

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

FEC ID number of contributing federal political committee. **C** C00441303

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 20 / 2013

**Transaction ID : C4812663**

Amount of Each Receipt this Period

1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSE COOPERS PAC**

Mailing Address 1900 K STREET NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4761628**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**RADIAN GROUP EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1601 MARKET STREET

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C C00302166**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : C4769691**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**REAL ESTATE ROUNDTABLE PAC REALPAC FKA NATIONAL REALTY PAC**

Mailing Address 801 PENNSYLVANIA AVENUESUITE 720

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00033779**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828409**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 106  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

A. Full Name (Last, First, Middle Initial)  
**REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **1900 5TH AVENUE NORTH  
6TH FLOOR**

City State Zip Code  
**Birmingham AL 35203**

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 24 / 2013**

Transaction ID : **C4802434**

Amount of Each Receipt this Period  
**2500.00**

B. Full Name (Last, First, Middle Initial)  
**RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWDSU COPE)**

Mailing Address **30 EAST 29TH STREET**

City State Zip Code  
**NEW YORK NY 10016**

FEC ID number of contributing federal political committee. **C C00174011**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1597.05**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 01 / 2013**

Transaction ID : **C4831878**

Amount of Each Receipt this Period  
**1597.05**

\* In-Kind: FR Catering Cost

C. Full Name (Last, First, Middle Initial)  
**SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIA**

Mailing Address **1425 K Street, NW, 7th Floor**

City State Zip Code  
**Washington DC 20005-3500**

FEC ID number of contributing federal political committee. **C C00431312**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

Transaction ID : **C4736186**

Amount of Each Receipt this Period  
**2500.00**

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

**6597.05**

**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 49 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A. Southern Minnesota Beet Sugar Cooperative**

Full Name (Last, First, Middle Initial)  
Southern Minnesota Beet Sugar Cooperative

Mailing Address c/o John Richmond, Olsson Frank &  
1400 Sixteenth Street, NW-Suite 40

City Washington State DC Zip Code 20036-2220

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2013

**Transaction ID : C4802480**

Amount of Each Receipt this Period  
 1000.00

**B. SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)**

Full Name (Last, First, Middle Initial)  
SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)

Mailing Address PO BOX 666

City BELLE GLADE State FL Zip Code 33430

FEC ID number of contributing federal political committee. **C** C00254656

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : C4761708**

Amount of Each Receipt this Period  
 1000.00

**C. SunTrust PAC**

Full Name (Last, First, Middle Initial)  
SunTrust PAC

Mailing Address 919 East Main Street

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00386524

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828421**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 106		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TD BANK NA POLITICAL ACTION COMMITTEE**

Mailing Address **317 MADISON AVENUE**  
**2nd FLOOR**

City **NEW YORK** State **NY** Zip Code **10017**

FEC ID number of contributing federal political committee. **C C00501429**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 20 / 2013**

**Transaction ID : C4812669**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC**

Mailing Address **1101 PENNSYLVANIA**

City **Washington** State **DC** Zip Code **20004**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**05 / 31 / 2013**

**Transaction ID : C4799479**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**THEATRICAL PROTECTIVE UNION LOCAL NO ONE IATSE NEW**

Mailing Address **320 WEST 46TH STREET**

City **New York** State **NY** Zip Code **10036**

FEC ID number of contributing federal political committee. **C C00325639**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 10 / 2013**

**Transaction ID : C4817349**

Amount of Each Receipt this Period  
**500.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 106
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**TITLE INDUSTRY POLITICAL ACTION COMMITTEE**

Mailing Address Attn: Mr. Kurt Pfothenauer  
1828 L Street N.W. - Suite 705

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : C4799461**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**U.S. BANCORP FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1120 Connecticut Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00488882

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 29 / 2013

**Transaction ID : C4828408**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**WESTERN SUGAR COOPERATIVE PAC**

Mailing Address 7555 EAST HAMPDEN AVENUE - SUITE 6

City Denver State CO Zip Code 80231

FEC ID number of contributing federal political committee. **C** C00446674

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 05 / 2013

**Transaction ID : C4724296**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

114347.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Loula Loi Alafoyiannis</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013	
Mailing Address 147-37 Beech Avenue Suite 4A			Amount of Each Disbursement this Period 1000.00	
City Flushing	State NY	Zip Code 11355	Transaction ID : D363540	
Purpose of Disbursement FR Consultant		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. American Dream Car</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013	
Mailing Address 297 Pleasant Avenue			Amount of Each Disbursement this Period 328.00	
City New York	State NY	Zip Code 10029	Transaction ID : D368610	
Purpose of Disbursement Ground Transportation		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. American Dream Car</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013	
Mailing Address 297 Pleasant Avenue			Amount of Each Disbursement this Period 542.37	
City New York	State NY	Zip Code 10029	Transaction ID : D368674	
Purpose of Disbursement Transportation		012 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1870.37
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : D369162</b>
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : D369165</b>
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 7.95 <b>Transaction ID : D369167</b>
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Collection Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ansonia Independent Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2013
Mailing Address 200 West 72nd Street		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D368602</b>
City New York	State NY	
Zip Code 10023	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bubbles &amp; Suds</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 3207 University Blvd. W. Suite 11		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D363187</b>
City Kensington	State MD	
Zip Code 20895	Purpose of Disbursement FR Cleaning Cost	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Chelsea Reform Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 309 W 20th St		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D363188</b>
City New York	State NY	
Zip Code 10011-3306	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. ConEdison Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address P.O. Box 1702		Amount of Each Disbursement this Period 206.82 <b>Transaction ID : D365197</b>
City New Yrok	State NY	
Zip Code 10001	Purpose of Disbursement Utility	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ConEdison Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address P.O. Box 1702		Amount of Each Disbursement this Period 28.34 <b>Transaction ID : D365198</b>
City New Yrok	State NY	
Zip Code 10001	Purpose of Disbursement Utility	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ConEdison Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address P.O. Box 1702		Amount of Each Disbursement this Period 53.50 <b>Transaction ID : D362830</b>
City New Yrok	State NY	
Zip Code 10001	Purpose of Disbursement Utility	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	288.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. ConEdison Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013	
Mailing Address P.O. Box 1702			Amount of Each Disbursement this Period 60.00	
City New York	State NY	Zip Code 10001	Transaction ID : D368667	
Purpose of Disbursement Utility		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Cyrus Vance For District Attorney</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013	
Mailing Address 333 West 52nd Street Suite 1003			Amount of Each Disbursement this Period 500.00	
City New York	State NY	Zip Code 10019	Transaction ID : D368645	
Purpose of Disbursement Donation		Category/ Type 012		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013	
Mailing Address 601 13TH ST NW SUITE 580 SOUTH			Amount of Each Disbursement this Period 650.00	
City Washington	State DC	Zip Code 20005	Transaction ID : D365025	
Purpose of Disbursement FR Catering Cost		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		* In-Kind Received	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1210.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Downtown Independent Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 512 Greenwich Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D368652</b>
City New York	State NY	
Zip Code 10013	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Downtown Independent Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address 512 Greenwich Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D368672</b>
City New York	State NY	
Zip Code 10013	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. East Side Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013
Mailing Address 301 East 87 Street, 17A		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368660</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eleanor Roosevelt Legacy Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address P.O. Box 20293 Greenly Square Station			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D368654</b>
City New York	State NY	Zip Code 10001	
Purpose of Disbursement Donation		Candidate Name	Category/ Type 012
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Extravagant Events Catering</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 109 Hobson Nursery Lane			Amount of Each Disbursement this Period 670.00 <b>Transaction ID : D368653</b>
City Queenstown	State MD	Zip Code 21658	
Purpose of Disbursement FR Room Cost 5/2		Candidate Name	Category/ Type 003
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Extravagant Events Catering</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2013
Mailing Address 109 Hobson Nursery Lane			Amount of Each Disbursement this Period 495.50 <b>Transaction ID : D368658</b>
City Queenstown	State MD	Zip Code 21658	
Purpose of Disbursement FR Room Cost 5/23		Candidate Name	Category/ Type 003
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1415.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Extravagant Events Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address 109 Hobson Nursery Lane		Amount of Each Disbursement this Period 687.50 <b>Transaction ID : D365195</b>
City Queenstown	State MD	
Zip Code 21658	Purpose of Disbursement FR Catering Cost 6/25	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Extravagant Events Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 109 Hobson Nursery Lane		Amount of Each Disbursement this Period 637.92 <b>Transaction ID : D364972</b>
City Queenstown	State MD	
Zip Code 21658	Purpose of Disbursement Catering Cost 6/13	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Extravagant Events Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 109 Hobson Nursery Lane		Amount of Each Disbursement this Period 637.92 <b>Transaction ID : D364973</b>
City Queenstown	State MD	
Zip Code 21658	Purpose of Disbursement Catering Cost 6/28	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1963.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Extravagant Events Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 109 Hobson Nursery Lane		Amount of Each Disbursement this Period 1140.00 <b>Transaction ID : D363185</b>
City Queenstown	State MD	
Zip Code 21658	Purpose of Disbursement FR Catering Cost	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Extravagant Events Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 109 Hobson Nursery Lane		Amount of Each Disbursement this Period 887.50 <b>Transaction ID : D362824</b>
City Queenstown	State MD	
Zip Code 21658	Purpose of Disbursement Catering Cost 4/26	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Feinberg &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address 15-01 Broadway Attn: Mark Feinberg		Amount of Each Disbursement this Period 425.00 <b>Transaction ID : D361420</b>
City Fair Lawn	State NJ	
Zip Code 07410	Purpose of Disbursement Review/Preparation of Payroll Tax Returns	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2452.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Feinberg &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2013
Mailing Address 15-01 Broadway Attn: Mark Feinberg		Amount of Each Disbursement this Period 425.00 <b>Transaction ID : D368588</b>
City Fair Lawn	State NJ	
Zip Code 07410	Purpose of Disbursement Review/Preparation of Payroll Tax Returns	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Feminist Majority</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 1600 Wilson Blvd.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D368659</b>
City Arlington	State VA	
Zip Code 22029	Purpose of Disbursement Donation	Category/Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Gay &amp; Lesbian Independent Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2013
Mailing Address c/o Th LGBT Center 208 West 13th Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368616</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Donation	Category/Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hellenic Times Scholarchipp Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2013
Mailing Address 823 11th Ave		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D368601</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Michael Iger</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 4661 23rd Rd.		Amount of Each Disbursement this Period 195.60 <b>Transaction ID : D362841</b>
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement Phone Charge Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kings County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address 16 Court St.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D368614</b>
City Bklyn	State NY	
Zip Code 12207	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3095.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lenox Hill Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013
Mailing Address 1338 First Avenue			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368650</b>
City New York	State NY	Zip Code 10021	
Purpose of Disbursement Donation	Candidate Name		Category/ Type 012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Lexington Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013
Mailing Address 301 East 79th Street			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368649</b>
City New York	State NY	Zip Code 10022	
Purpose of Disbursement Donation	Candidate Name		Category/ Type 012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Liberty Concepts</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 119 Braintree St Ste 602			Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D362832</b>
City Boston	State MA	Zip Code 02134-1660	
Purpose of Disbursement Website Maintenance	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Liberty Concepts</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2013
Mailing Address 119 Braintree St Ste 602		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D368603</b>
City Boston State MA Zip Code 02134-1660	Purpose of Disbursement Website Maintenance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Liberty Concepts</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 119 Braintree St Ste 602		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D365202</b>
City Boston State MA Zip Code 02134-1660	Purpose of Disbursement Website Maintenance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lichten &amp; Bright</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address 475 Park Ave South 17 Floor		Amount of Each Disbursement this Period 5300.00 <b>Transaction ID : D362365</b>
City New York State NY Zip Code 10016	Purpose of Disbursement Legal Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5900.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 106			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Andrew S. Lowenthal</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address 12006 River Rd		Amount of Each Disbursement this Period 324.55 <b>Transaction ID : D368590</b>
City Potomac	State MD	
Zip Code 20854-1246	Purpose of Disbursement Catering Cost	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. McManus Midtown Democratic Assoc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 345 West 44th Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D368643</b>
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Melissa Mendez</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 25-38 100th St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368657</b>
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Reimbursement for Office Moving	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1024.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Melissa Mendez</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2013
Mailing Address 25-38 100th St		Amount of Each Disbursement this Period 300.45 <b>Transaction ID : D368670</b>
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Travel Reimbursement	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Melissa Mendez</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2013
Mailing Address 25-38 100th St		Amount of Each Disbursement this Period 380.00 <b>Transaction ID : D368608</b>
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Reimbursement for Office Moving	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Millennial Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address 1044 Northern Boulevard Suite 302		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D368589</b>
City Roslyn	State NY	
Zip Code 11576	Purpose of Disbursement FR Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3180.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Millennial Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1044 Northern Boulevard Suite 302		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D362843</b>
City Roslyn State NY Zip Code 11576	Purpose of Disbursement FR Consultant 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2013
Mailing Address 30 Ivy Street S. E.		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : D368605</b>
City Washigton State DC Zip Code 20003	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ms. Nina Neivens</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2013
Mailing Address 24 East 93rd Street		Amount of Each Disbursement this Period 2609.00 <b>Transaction ID : D368677</b>
City New York State NY Zip Code 10028	Purpose of Disbursement Office Rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5599.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 106			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Nina Neivens</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 09 / 2013</b>
Mailing Address <b>24 East 93rd Street</b>		Amount of Each Disbursement this Period <b>3118.00</b> <b>Transaction ID : D369280</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10028</b>	Purpose of Disbursement <b>Office Rent</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Nina Neivens</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 10 / 2013</b>
Mailing Address <b>24 East 93rd Street</b>		Amount of Each Disbursement this Period <b>2100.00</b> <b>Transaction ID : D369293</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10028</b>	Purpose of Disbursement <b>Office Rent</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 21 / 2013</b>
Mailing Address <b>1101 15th St, NW Suite 500</b>		Amount of Each Disbursement this Period <b>2100.00</b> <b>Transaction ID : D368666</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20005</b>	Purpose of Disbursement <b>Computer Software Fee</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7318.00</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)	PAGE 69 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. North Pole Cooling Corp</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 193 20th St			Amount of Each Disbursement this Period 275.00 <b>Transaction ID : D365031</b>
City Brooklyn	State NY	Zip Code 11232	
Purpose of Disbursement AC Uninstallation Cost		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex Payroll</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 135 Chestnut Ridge Road			Amount of Each Disbursement this Period 2251.00 <b>Transaction ID : D368942</b>
City New Jersey	State NJ	Zip Code 07645	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex Payroll</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2013
Mailing Address 135 Chestnut Ridge Road			Amount of Each Disbursement this Period 2383.99 <b>Transaction ID : D368922</b>
City New Jersey	State NJ	Zip Code 07645	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4909.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex Payroll</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 135 Chestnut Ridge Road		Amount of Each Disbursement this Period 2250.97 <b>Transaction ID : D368925</b>
City New Jersey	State NJ	
Zip Code 07645	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pocahontas Regular Democratic Org.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 41-05 Newton Road		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D368641</b>
City Long Island City	State NY	
Zip Code 11103	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Allegro R.E.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address 750 Columbus Avenue		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D368631</b>
City New York	State NY	
Zip Code 10025	Purpose of Disbursement Bookkeeping	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5500.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Allegro R.E.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2013</b>
Mailing Address <b>750 Columbus Avenue</b>		Amount of Each Disbursement this Period <b>3000.00</b> <b>Transaction ID : D369281</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10025</b>	Purpose of Disbursement <b>Bookkeeping</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RETAIL, WHOLESALE &amp; DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWDSU COPE)</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 01 / 2013</b>
Mailing Address <b>30 EAST 29TH STREET</b>		Amount of Each Disbursement this Period <b>1597.05</b> <b>Transaction ID : D368582</b>
City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10016</b>	Purpose of Disbursement <b>FR Catering Cost</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

\* In-Kind Received

Full Name (Last, First, Middle Initial) <b>c. Ridgewood Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2013</b>
Mailing Address <b>60-70 Putman Avenue</b>		Amount of Each Disbursement this Period <b>450.00</b> <b>Transaction ID : D368611</b>
City <b>Ridgewood</b> State <b>NY</b> Zip Code <b>11385</b>	Purpose of Disbursement <b>Donation</b> Category/Type <b>012</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5047.05</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)		PAGE 72 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ridgewood Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013	
Mailing Address 60-70 Putman Avenue			Amount of Each Disbursement this Period 250.00	
City Ridgewood	State NY	Zip Code 11385	Transaction ID : D368638	
Purpose of Disbursement Donation		012 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Samuel Tilden Democratic Club</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2013	
Mailing Address 152 East 22nd Street			Amount of Each Disbursement this Period 500.00	
City New York	State NY	Zip Code 10010	Transaction ID : D368963	
Purpose of Disbursement Donation		012 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Securities Industry &amp; Financial Markets Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address 1101 New York Avenue			Amount of Each Disbursement this Period 250.00	
City Washington	State DC	Zip Code 20005	Transaction ID : D362842	
Purpose of Disbursement Room Rental Cost		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Seneca Club</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2013
Mailing Address 16 Court Street c/o Richard Goldberg		Amount of Each Disbursement this Period 285.00 <b>Transaction ID : D368618</b>
City Brooklyn	State NY	
Zip Code 11241	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. September 11th Families Association</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 120 Liberty Street		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D368655</b>
City New York	State NY	
Zip Code 10006	Purpose of Disbursement Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Arnis Serhati</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 201 Lamped Loop #A		Amount of Each Disbursement this Period 663.33 <b>Transaction ID : D368642</b>
City Staten Island	State NY	
Zip Code 10314	Purpose of Disbursement Repairs to Campaing Office	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1948.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Todd Shapiro</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 106 Central Park South		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D368675</b>
City New York	State NY	
Zip Code 10019	Purpose of Disbursement PR Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Tricia M Shimamura</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2013
Mailing Address 339 E. 94th Street Apt 3B		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D368678</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ms. Tricia M Shimamura</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 339 E. 94th Street Apt 3B		Amount of Each Disbursement this Period 1400.00 <b>Transaction ID : D368612</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Tricia M Shimamura</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 339 E. 94th Street Apt 3B		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : D368600</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Tricia M Shimamura</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2013
Mailing Address 339 E. 94th Street Apt 3B		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D365529</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. June Silverberg</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2013
Mailing Address 9571 43 Street SE		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368580</b>
City Mercer Island	State WA	
Zip Code 98040	Purpose of Disbursement FR Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. June Silverberg</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2013
Mailing Address 9571 43 Street SE		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368581</b>
City Mercer Island	State WA	
Zip Code 98040	Purpose of Disbursement FR Consultant	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Silverberg Associates</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2013
Mailing Address 110 D Street, SE, Suite 312		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : D365844</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement FR Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Silverberg Associates</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2013
Mailing Address 110 D Street, SE, Suite 312		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D363186</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement DC Finance Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Silverberg Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 110 D Street, SE, Suite 312		Amount of Each Disbursement this Period 6100.00 <b>Transaction ID : D364974</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement DC Finance Consultant Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. David Sims</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address 11414 Kedleston Rd.		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D368630</b>
City Glenn Dale State MD Zip Code 20769	Purpose of Disbursement FR Photography Cost Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Anastasia D. Skelton</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 4490 Merrick Road		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D368613</b>
City Masspegua State NY Zip Code 11758	Purpose of Disbursement Stipend Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anastasia D. Skelton</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 4490 Merrick Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D368594</b>
City Masspegua	State NY	
Purpose of Disbursement Stipend		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anastasia D. Skelton</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013
Mailing Address 4490 Merrick Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D361206</b>
City Masspegua	State NY	
Purpose of Disbursement Stipend		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address P.O. Box 182378		Amount of Each Disbursement this Period 274.65 <b>Transaction ID : D365200</b>
City Columbus	State OH	
Purpose of Disbursement Office Supplies		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1274.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stonewall Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address P.O. Box 514		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D362371</b>
City Old Chelsea Statio	State NY	
Zip Code 10013	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ms. Marcia Dickstein Sudolsky</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 131 E 93rd Street Apt. 1CD		Amount of Each Disbursement this Period 2250.00 <b>Transaction ID : D362845</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Ms. Marcia Dickstein Sudolsky</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 131 E 93rd Street Apt. 1CD		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D368598</b>
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Consultant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunny Communications LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 77 29 78th Street		Amount of Each Disbursement this Period 1306.50 <b>Transaction ID : D368599</b>
City Glendale	State NY	
Zip Code 11385	Purpose of Disbursement Network Setup Cost	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sunny Communications LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2013
Mailing Address 77 29 78th Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D368609</b>
City Glendale	State NY	
Zip Code 11385	Purpose of Disbursement Phone System Cost	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Sunny Communications LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2013
Mailing Address 77 29 78th Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D368617</b>
City Glendale	State NY	
Zip Code 11385	Purpose of Disbursement Internet Modem Cost	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1706.50
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunny Communications LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013	
Mailing Address 77 29 78th Street			Amount of Each Disbursement this Period 225.00	
City Glendale	State NY	Zip Code 11385	Transaction ID : D368637	
Purpose of Disbursement Office Computer Maintanance		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Suntrust Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013	
Mailing Address PO Box 6600			Amount of Each Disbursement this Period 46.43	
City Hagerstown	State MD	Zip Code 21740	Transaction ID : D369166	
Purpose of Disbursement Merchant Discount		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Suntrust Merchant Services</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2013	
Mailing Address PO Box 6600			Amount of Each Disbursement this Period 43.98	
City Hagerstown	State MD	Zip Code 21740	Transaction ID : D369163	
Purpose of Disbursement Merchant Discount		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	315.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Suntrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2013
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 97.02 <b>Transaction ID : D369164</b>
City Hagerstown	State MD	
Zip Code 21740	Purpose of Disbursement Merchant Discount	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Terrace On The Park</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2013
Mailing Address 52-11 111th Stree		Amount of Each Disbursement this Period 9585.00 <b>Transaction ID : D368569</b>
City Corona	State NY	
Zip Code 11368	Purpose of Disbursement FR Catering Cost	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Courier</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 38-15 Bell Blvd		Amount of Each Disbursement this Period 145.00 <b>Transaction ID : D365207</b>
City Bayside	State NY	
Zip Code 11361	Purpose of Disbursement Print Ad	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9809.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Courier</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 38-15 Bell Blvd		Amount of Each Disbursement this Period 145.00 <b>Transaction ID : D362833</b>
City Bayside State NY Zip Code 11361	Purpose of Disbursement Print Ad 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Lower East Side Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 34 Monroe St		Amount of Each Disbursement this Period 225.00 <b>Transaction ID : D368596</b>
City New York State NY Zip Code 10002	Purpose of Disbursement Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The National Herald</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 37-10 30th St		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : D362840</b>
City Long Island City State NY Zip Code 11101	Purpose of Disbursement Print Ad 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	520.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. The National Herald</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address 37-10 30th St			Amount of Each Disbursement this Period 150.00 <b>Transaction ID : D365203</b>
City Long Island City	State NY	Zip Code 11101	
Purpose of Disbursement Print Ad	Candidate Name		Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. The Palisades Parks Conservancy</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 3006 Seven Lakes Drive PO Box 427			Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D368662</b>
City Bear Mountain	State NY	Zip Code 10911	
Purpose of Disbursement Donation	Candidate Name		Category/ Type 012
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. The Service</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address 42-16 34th Avenue			Amount of Each Disbursement this Period 155.00 <b>Transaction ID : D368665</b>
City Long Island	State NY	Zip Code 11101	
Purpose of Disbursement Print Ad	Candidate Name		Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	605.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. The Service</b>		M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address 42-16 34th Avenue		Amount of Each Disbursement this Period
City Long Island State NY Zip Code 11101		155.00
Purpose of Disbursement Print Ad	Category/ Type	<b>Transaction ID : D365204</b>
Candidate Name	004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. The Service</b>		M M / D D / Y Y Y Y 04 / 16 / 2013
Mailing Address 42-16 34th Avenue		Amount of Each Disbursement this Period
City Long Island State NY Zip Code 11101		155.00
Purpose of Disbursement Print Ad	Category/ Type	<b>Transaction ID : D362835</b>
Candidate Name	004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. The Service</b>		M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 42-16 34th Avenue		Amount of Each Disbursement this Period
City Long Island State NY Zip Code 11101		155.00
Purpose of Disbursement Print Ad	Category/ Type	<b>Transaction ID : D362836</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	465.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Service</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2013
Mailing Address 42-16 34th Avenue		Amount of Each Disbursement this Period 8 9 0 1 2 3 4 5 6 7 8 9 . 0 0 <b>Transaction ID : D362837</b>
City Long Island	State NY Zip Code 11101	
Purpose of Disbursement Print Ad	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Three Parks Independent Democrats</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2013
Mailing Address Cathedral Station, PO Box 1316		Amount of Each Disbursement this Period 8 9 0 1 2 3 4 5 6 7 8 9 . 0 0 <b>Transaction ID : D368651</b>
City New York	State NY Zip Code 10025	
Purpose of Disbursement Donation	Category/Type 012	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address P.O. Box 9227		Amount of Each Disbursement this Period 8 9 0 1 2 3 4 5 6 7 8 9 . 3 4 <b>Transaction ID : D368669</b>
City Uniondale	State NY Zip Code 11555	
Purpose of Disbursement Internet Modem Cost	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	844.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Time Warner Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address P.O. Box 9227		Amount of Each Disbursement this Period 188.07 <b>Transaction ID : D365196</b>
City Uniondale	State NY	
Zip Code 11555	Purpose of Disbursement Internet Modem	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jacob Tugendrajch</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 315 West 23rd Street Apt 6B		Amount of Each Disbursement this Period 75.66 <b>Transaction ID : D362831</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Office Suplies Reimbursements	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mr. Andrew Tulloch</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 301 G Street, SW Apt. 120		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D362368</b>
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Legal Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1763.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 157.28 <b>Transaction ID : D362827</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 18.75 <b>Transaction ID : D362828</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 287.05 <b>Transaction ID : D362829</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	463.08
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 298.36 <b>Transaction ID : D365199</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 151.98 <b>Transaction ID : D365208</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 542.48 <b>Transaction ID : D368586</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	992.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 325.38 <b>Transaction ID : D368668</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 154.63 <b>Transaction ID : D368663</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2013
Mailing Address P.O. Box 15124		Amount of Each Disbursement this Period 294.17 <b>Transaction ID : D368664</b>
City Albany State NY Zip Code 12212-5124	Purpose of Disbursement Phone 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	774.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 106			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Willard Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2013
Mailing Address 1401 Pennsylvania Avenue Northwest		Amount of Each Disbursement this Period 301.50
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement FR Catering Cost	<b>Transaction ID : D365190</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Presidential Inauguration</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address United States Capitol		Amount of Each Disbursement this Period 305.00
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Donation	<b>Transaction ID : D369101</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Yura Co. On Madison</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2013
Mailing Address 1292 Madison Ave.		Amount of Each Disbursement this Period 58.96
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Meeting Cost	<b>Transaction ID : D369119</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	301.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex Payroll</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 135 Chestnut Ridge Road			Amount of Each Disbursement this Period 5037.09 <b>Transaction ID : D368912</b>
City New Jersey	State NJ	Zip Code 07645	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Melissa Mendez</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 25-38 100th St			Amount of Each Disbursement this Period 3170.22 <b>Transaction ID : D368913</b> <b>[MEMO ITEM]</b>
City East Elmhurst	State NY	Zip Code 11369	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Allegro R.E.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 750 Columbus Avenue			Amount of Each Disbursement this Period 1866.87 <b>Transaction ID : D368914</b> <b>[MEMO ITEM]</b>
City New York	State NY	Zip Code 10025	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5037.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
**A. Paychex Payroll**

Mailing Address 135 Chestnut Ridge Road

City New Jersey State NJ Zip Code 07645

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
05 / 28 / 2013

Amount of Each Disbursement this Period: 5037.11

Transaction ID : D368926

Full Name (Last, First, Middle Initial)  
**B. Melissa Mendez**

Mailing Address 25-38 100th St

City East Elmhurst State NY Zip Code 11369

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
05 / 28 / 2013

Amount of Each Disbursement this Period: 3170.44

Transaction ID : D368928

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Allegro R.E.**

Mailing Address 750 Columbus Avenue

City New York State NY Zip Code 10025

Purpose of Disbursement Payroll 001 Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
05 / 28 / 2013

Amount of Each Disbursement this Period: 1866.67

Transaction ID : D368930

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 5037.11

**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 94 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex Payroll</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2013
Mailing Address 135 Chestnut Ridge Road		Amount of Each Disbursement this Period 5037.08 <b>Transaction ID : D368941</b>
City New Jersey	State NJ	
Zip Code 07645	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Melissa Mendez</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 25-38 100th St		Amount of Each Disbursement this Period 3170.41 <b>Transaction ID : D368945</b> <b>[MEMO ITEM]</b>
City East Elmhurst	State NY	
Zip Code 11369	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Allegro R.E.</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 750 Columbus Avenue		Amount of Each Disbursement this Period 1866.67 <b>Transaction ID : D368947</b> <b>[MEMO ITEM]</b>
City New York	State NY	
Zip Code 10025	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5037.08
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address P.O.Box 2855			Amount of Each Disbursement this Period 9328.37
City New York	State NY	Zip Code 10116-2855	
Purpose of Disbursement See split		Category/ Type	<b>Transaction ID : D369031</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. 800 Flowers</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address 35-19 Broadway			Amount of Each Disbursement this Period 90.23
City Astoria	State NY	Zip Code 11106	
Purpose of Disbursement FR Flowers		Category/ Type	<b>Transaction ID : D369100</b> <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. American Express Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address P.O.Box 2855			Amount of Each Disbursement this Period 275.57
City New York	State NY	Zip Code 10116-2855	
Purpose of Disbursement Interest Charge		Category/ Type	<b>Transaction ID : D369106</b> <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9328.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 35.00
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Fees	Transaction ID : D369072
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 220.23
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Interest Charge	Transaction ID : D369073
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COSI</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2013
Mailing Address 1700 Pennsylvania Ave		Amount of Each Disbursement this Period 6925.09
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement FR Catering Cost	Transaction ID : D369035
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 106			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Costco Wholesale Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address 32-50 Vernon Blvd.			Amount of Each Disbursement this Period 22.28
City Long Island	State NY	Zip Code 11106	
Purpose of Disbursement FR Supplies	Candidate Name		Transaction ID : D369105 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 003		

Full Name (Last, First, Middle Initial) <b>B. Faith &amp; Politics Institute</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2013
Mailing Address 110 Maryland Avenue, NE, Suite 504			Amount of Each Disbursement this Period 1165.00
City Washington	State DC	Zip Code 20002	
Purpose of Disbursement Political Retreat	Candidate Name		Transaction ID : D369182 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

Full Name (Last, First, Middle Initial) <b>C. Federal Express Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2013
Mailing Address 1475 Boettler Road			Amount of Each Disbursement this Period 175.40
City Uniontown	State OH	Zip Code 44685	
Purpose of Disbursement Mailing	Candidate Name		Transaction ID : D369098 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 001		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 106			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 1475 Boettler Road		Amount of Each Disbursement this Period 28.93
City Uniontown	State OH	
Purpose of Disbursement Mailing	Zip Code 44685	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Johnny's Half Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2013
Mailing Address 400 N Capitol St		Amount of Each Disbursement this Period 150.00
City Washington	State DC	
Purpose of Disbursement FR Catering Cost	Zip Code 20001	Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. USPS Moto</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2013
Mailing Address P.O Box 219424		Amount of Each Disbursement this Period 16.20
City Kansas City	State MD	
Purpose of Disbursement Mail	Zip Code 64121	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Yura Co. On Madison</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address 1292 Madison Ave.		Amount of Each Disbursement this Period 33.03
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Meeting Cost	Transaction ID : D369103 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Yura Co. On Madison</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address 1292 Madison Ave.		Amount of Each Disbursement this Period 17.91
City New York	State NY	
Zip Code 10128	Purpose of Disbursement Meeting Cost	Transaction ID : D369042 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 3783.22
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement See split	Transaction ID : D369107
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3783.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 45.00
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Membership Fee	Transaction ID : D369160 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 130.79
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement Interest Charge	Transaction ID : D369161 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 1475 Boettler Road		Amount of Each Disbursement this Period 50.04
City Uniontown	State OH	
Zip Code 44685	Purpose of Disbursement Mailing	Transaction ID : D369135 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Johnny's Half Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2013
Mailing Address 400 N Capitol St		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20001	Purpose of Disbursement FR Catering Cost	
Candidate Name	Category/Type 003	Transaction ID : D369123 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Johnny's Half Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address 400 N Capitol St		Amount of Each Disbursement this Period 425.75
City Washington State DC Zip Code 20001	Purpose of Disbursement FR Catering Cost	
Candidate Name	Category/Type 003	Transaction ID : D369128 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lincoln Center</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2013
Mailing Address 10 Lincoln Center Plaza		Amount of Each Disbursement this Period 2625.00
City New York State NY Zip Code 10023	Purpose of Disbursement Theater F/R Tickets	
Candidate Name	Category/Type 003	Transaction ID : D369202 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 106	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pascalou Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address 1308 Madison Avenue		Amount of Each Disbursement this Period 118.66
City New York	State NY	
Zip Code 10128	Purpose of Disbursement FR Catering Cost	Transaction ID : D369109
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2013
Mailing Address P.O.Box 2855		Amount of Each Disbursement this Period 3844.71
City New York	State NY	
Zip Code 10116-2855	Purpose of Disbursement See Split	Transaction ID : D369169
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Costco Wholesale Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2013
Mailing Address 32-50 Vernon Blvd.		Amount of Each Disbursement this Period 307.75
City Long Island	State NY	
Zip Code 11106	Purpose of Disbursement FR Supplies	Transaction ID : D369180
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3844.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 1475 Boettler Road		Amount of Each Disbursement this Period 200.67
City Uniontown	State OH	
Purpose of Disbursement Mailing	Zip Code 44685	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Feldman Housewares Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2013
Mailing Address 1304 Madison Avenue		Amount of Each Disbursement this Period 13.05
City New York	State NY	
Purpose of Disbursement Office Moving Expenses	Zip Code 10128	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2013
Mailing Address 73-01 25th Avenue		Amount of Each Disbursement this Period 609.13
City East Elmhurst	State NY	
Purpose of Disbursement Office Supplies	Zip Code 11369	Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial)  
**A. House Shop**

Mailing Address 529 14Th St Nw

City Washington State DC Zip Code 20045

Purpose of Disbursement FR Gifts Category/Type 003

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 06 / 20 / 2013

Amount of Each Disbursement this Period 634.15

Transaction ID : D369170

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Johnny's Half Shell**

Mailing Address 400 N Capitol St

City Washington State DC Zip Code 20001

Purpose of Disbursement FR Catering Cost Category/Type 003

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 13 / 2013

Amount of Each Disbursement this Period 1130.39

Transaction ID : D369211

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Staples Co.**

Mailing Address P.O. Box 182378

City Columbus State OH Zip Code 43216

Purpose of Disbursement Office Supplies Category/Type 001

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 06 / 11 / 2013

Amount of Each Disbursement this Period 198.35

Transaction ID : D369173

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 105 OF 106			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

Full Name (Last, First, Middle Initial) <b>A. Uline Supplies</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2013
Mailing Address 400 Boulder Drive		Amount of Each Disbursement this Period 201.50
City Breinigsville	State PA Zip Code 18031	
Purpose of Disbursement Office Moving Expenses	Category/Type 001	Transaction ID : D369219 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	137725.97

**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 106 OF 106	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Maloney for Congress**

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Unlimited Transfer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2013

Amount of Each Disbursement this Period: 35000.00

Transaction ID : D368676

Category/Type: 012

**B.**

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

Amount of Each Disbursement this Period

Category/Type

**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

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 35000.00

**TOTAL** This Period (last page this line number only)..... 35000.00