

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 24 East 93rd Street Suite 1B New York NY 10128 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00341990 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2007 through 12 31 2007

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 Andrew R. Tulloch, Esq.

Signature of Treasurer Electronically Filed by Andrew R. Tulloch, Esq. Date 10 15 2008

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 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
CAROLYN'S PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">57.25</td></tr></table>	57.25
Y	Y	Y	Y									
2	0	0	7									
57.25												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">57.25</td></tr></table>	57.25										
57.25												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">14000.00</td></tr></table>	14000.00	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">14000.00</td></tr></table>	14000.00								
14000.00												
14000.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">14057.25</td></tr></table>	14057.25	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">14057.25</td></tr></table>	14057.25								
14057.25												
14057.25												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">11566.00</td></tr></table>	11566.00	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">11566.00</td></tr></table>	11566.00								
11566.00												
11566.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">2491.25</td></tr></table>	2491.25	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">2491.25</td></tr></table>	2491.25								
2491.25												
2491.25												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">2700.00</td></tr></table>	2700.00										
2700.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
CAROLYN'S PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9000.00	9000.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	9000.00	9000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	5000.00	5000.00
(c) Other Political Committees (such as PACs) .....	14000.00	14000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	14000.00	14000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14000.00	14000.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	66.00	66.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	66.00	66.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	11500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11566.00	11566.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11566.00	11566.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	14000.00	14000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14000.00	14000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	66.00	66.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	66.00	66.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 10  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
CAROLYN'S PAC

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

Mailing Address 450 Seventh Avenue  
Penthouse

City State Zip Code  
New York NY 10123

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

Name of Employer Kaufman Management Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2007

Transaction ID: SA11AI.4105

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Elaine Sargent Leopold

Mailing Address 150 Central Park South  
#3501

City State Zip Code  
New York NY 10019

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

Name of Employer Self Occupation Investment Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2007

Transaction ID: SA11AI.4107

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Property Casualty Insurers Assn.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2007

Transaction ID: SA11AI.4142

Amount of Each Receipt this Period  
1000.00

Contribution - 2008 Cycle

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 10</span>	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
CAROLYN'S PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Diane Weiss		Date of Receipt
	Mailing Address 1500 Ocean Blvd Addison Bldg. Apt. 1601		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	South Boca Raton	FL	33432
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Self		Occupation Philanthropist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
			Transaction ID: SA11AI.4109
			Amount of Each Receipt this Period <input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="9000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 10	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) CAROLYN'S PAC
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<b>A.</b>	Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 51 Madison Ave. Room 1109	<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City State Zip Code New York NY 10010	<b>Transaction ID:</b> SA11C.4104
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00158881"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation	2007 Contribution
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
CAROLYN'S PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> SB23.4116 Date of Disbursement 09 / 27 / 2007	
	Mailing Address 430 South Capitol Street, SE 2nd Floor		
	City Washington State DC Zip Code 20003		Amount of Each Disbursement this Period 6500.00
	Purpose of Disbursement DCCC Contribution		
	Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE		Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>HILLARY CLINTON FOR PRESIDENT</b>	<b>Transaction ID:</b> SB23.4117 Date of Disbursement 07 / 06 / 2007	
	Mailing Address PO Box 101436		
	City Arlington State VA Zip Code 22210		Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement Primary Contribution		
	Candidate Name HILLARY CLINTON FOR PRESIDENT		Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>HILLARY CLINTON FOR PRESIDENT</b>	<b>Transaction ID:</b> SB23.4119 Date of Disbursement 12 / 31 / 2007	
	Mailing Address PO Box 101436		
	City Arlington State VA Zip Code 22210		Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Final Contribution- 2007		
	Candidate Name HILLARY CLINTON FOR PRESIDENT		Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

11500.00

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

11500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 / 10	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
CAROLYN'S PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HILLARY CLINTON FOR PRESIDENT			Nature of Debt (Purpose): Excess Contribution to be Refunded
Mailing Address PO Box 101436			
City Arlington	State VA	ZIP Code 22210	

Outstanding Balance Beginning This Period		Transaction ID: SD9.4141	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2700.00	0.00	2700.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	2700.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	2700.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	2700.00