

**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

Nita Lowey for Congress

ADDRESS (number and street) ▼

PO Box 271

Check if different than previously reported. (ACC)

White Plains

NY

10605

2. **FEC IDENTIFICATION NUMBER** ▼

C C00219881

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NY

17

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Richard Melnikoff

Signature of Treasurer Richard Melnikoff

[Electronically Filed]

Date

/  /

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  
**Nita Lowey 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))....	79068.34	1570188.92
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	79068.34	1565188.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	4934.08	680991.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	357.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4934.08	680634.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	742112.95	
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

**Nita Lowey 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).....	27525.00	1171847.26
(ii) Unitemized.....	2043.34	28341.66
(iii) TOTAL of contributions from individuals ▶	29568.34	1200188.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	49500.00	370000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	79068.34	1570188.92
<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	357.28
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	33.93	546.56
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	79102.27	1571092.76

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4934.08	680991.41
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	5000.00
(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	5000.00
21. OTHER DISBURSEMENTS .....	250000.00	437956.79
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	254934.08	1123948.20

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	917944.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	79102.27
25. SUBTOTAL (add Line 23 and Line 24).....	997047.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	254934.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	742112.95

**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jules Berger**

Mailing Address 427 Ridgeway

City State Zip Code  
White Plains NY 10605-4205

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

Name of Employer Self Occupation Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : C21837537**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Stuart Berger**

Mailing Address 141 Halstead Ave

City State Zip Code  
Mamaroneck NY 10543-2607

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

Name of Employer Self Occupation Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : C21837548**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Berkovitch**

Mailing Address 13115 Merrick Blvd

City State Zip Code  
Jamaica NY 11434-4133

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

Name of Employer Gordon Supply Company Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2016

**Transaction ID : C21837781**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 6 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frederic Bogart**

Mailing Address 120 SE 5th Ave

City State Zip Code  
Boca Raton FL 33432-5072

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837849**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Albert Chance**

Mailing Address 2 Piping Brook Ln

City State Zip Code  
Bedford NY 10506-2208

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

Name of Employer Occupation  
Douglas Elliman Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837854**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Carole Daman**

Mailing Address 10 Floren Pl

City State Zip Code  
Scarsdale NY 10583-6634

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837952**

Amount of Each Receipt this Period  
 500.00

Memo Item

**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 7 OF 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Howard Elman**

Mailing Address 29 Dobbs Ter

City Scarsdale State NY Zip Code 10583-2005

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

Name of Employer Matalon Schwecky Elman PLLC Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837953**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Martin Frost**

Mailing Address 1401 I St NW Ste 800

City Washington State DC Zip Code 20005-2295

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

Name of Employer Polsinelli & Shughart P.C. Occupation Government Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21844959**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Conrad Gordon**

Mailing Address 974 Heritage Hls Unit C

City Somers State NY Zip Code 10589-3147

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

Name of Employer Fulton Outfitters inc Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837954**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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: PAGE 8 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Kleinberg**

Mailing Address 65 Ramona Ct

City State Zip Code  
New Rochelle NY 10804-1908

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

Name of Employer Self Occupation Architect

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837956**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Joshua Lookstein**

Mailing Address 108 Harvard Rd

City State Zip Code  
Scarsdale NY 10583-6753

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

Name of Employer Westchester Day School Occupation Head of School

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837957**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 111 Cushman Rd

City State Zip Code  
Scarsdale NY 10583-3405

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

Name of Employer Arizona Iced Tea Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837958**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1500.00



**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis Monasebian**

Mailing Address 188 Byram Lake Rd

City Armonk State NY Zip Code 10504-1509

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837959**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Robert Newman**

Mailing Address 73 Sandrock Ave

City Dobbs Ferry State NY Zip Code 10522-1512

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

Name of Employer Newman & Morrison Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837968**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ari Perkins**

Mailing Address 31 Mayhew Ave

City Larchmont State NY Zip Code 10538-2740

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

Name of Employer Norwalk Hospital Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837969**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 10 OF 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl Brandes Pine**

Mailing Address 19 Scott Cir

City State Zip Code  
Purchase NY 10577-1905

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

Name of Employer Occupation  
Self Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : C21837971**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Rafalowicz**

Mailing Address 1 Fenimore Rd

City State Zip Code  
New Rochelle NY 10804-2103

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : C21837979**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Binday Ronald**

Mailing Address 32 Cooper Rd

City State Zip Code  
Scarsdale NY 10583-2832

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

Name of Employer Occupation  
Advocate Brokerage Corp Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : C21837782**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Erin Rudensky**

Mailing Address 8 Archer Ln

City State Zip Code  
Scarsdale NY 10583-7704

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837980**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 18 Sturbridge Pl

City State Zip Code  
Scarsdale NY 10583-6020

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

Name of Employer Occupation  
Self Accountant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837992**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rochelle Sherman**

Mailing Address 149 Wykagyl Ter

City State Zip Code  
New Rochelle NY 10804-3124

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

Name of Employer Occupation  
Self Neuropsychologist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21837993**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dale Snape**

Mailing Address 7710 Woodmont Ave  
Apt 312

City State Zip Code  
Bethesda MD 20814-6057

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

Name of Employer Occupation  
Wexler | Walker Vice Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : C21844317**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Glen Tobias**

Mailing Address 737 Park Ave  
Apt 15A

City State Zip Code  
New York NY 10021-4297

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : C21836380**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lynn Tobias**

Mailing Address 737 Park Ave  
Apt 15A

City State Zip Code  
New York NY 10021-4297

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

Name of Employer Occupation  
Self Employed Volunteer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : C21836381**

Amount of Each Receipt this Period  
1700.00

Memo Item

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

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

4200.00

**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lynn Tobias**

Mailing Address 737 Park Ave  
Apt 15A

City State Zip Code  
New York NY 10021-4297

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

Name of Employer Occupation  
Self Employed Volunteer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 20 / 2016

**Transaction ID : C21836382**

Amount of Each Receipt this Period  
300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Stanley Wasserman**

Mailing Address 214 Trenor Dr

City State Zip Code  
New Rochelle NY 10804-3812

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

Name of Employer Occupation  
S. W. Management, LLC Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : C21838003**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Stanley Wasserman**

Mailing Address 214 Trenor Dr

City State Zip Code  
New Rochelle NY 10804-3812

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

Name of Employer Occupation  
S. W. Management, LLC Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2016

**Transaction ID : C21862721**

Amount of Each Receipt this Period  
300.00

Memo Item

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 14 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Constance Weissman**

Mailing Address 805 Taylors Ln

City Mamaroneck State NY Zip Code 10543-4251

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21838004**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Robert R. Wiener**

Mailing Address 600 Mamaroneck Ave

City Harrison State NY Zip Code 10528-1635

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2016

**Transaction ID : C21838006**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Froma Benerofe**

Mailing Address 18 cottage ave

City Purchase State NY Zip Code 10577-1104

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

Name of Employer self Occupation social worker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21855292A**

Amount of Each Receipt this Period  
200.00

Memo Item

\* Earmarked Contribution: See Below

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 15 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **4943.34** \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21855292AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200.00** \_\_\_\_\_

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Bonagura**

Mailing Address **226 church street**

City **white plains** State **NY** Zip Code **10603-3510**

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

Name of Employer **Law Office of Steven G. Fauth** Occupation **paralegal**

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **475.00** \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 22 / 2016**

**Transaction ID : C21846168A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200.00** \_\_\_\_\_

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **4943.34** \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21846168AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200.00** \_\_\_\_\_

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_ **200.00** \_\_\_\_\_

\_\_\_\_\_ \_\_\_\_\_

**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Cohen**

Mailing Address 3354 Curry St.

City Yorktown Heights State NY Zip Code 10598-2613

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
06 / 29 / 2016

**Transaction ID : C21855300A**

Amount of Each Receipt this Period  
125.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4943.34

Date of Receipt  
06 / 30 / 2016

**Transaction ID : C21855300AB**

Amount of Each Receipt this Period  
125.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Priscilla Gilman**

Mailing Address 4538 Deer Run

City Evans State GA Zip Code 30809-4446

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
596.00

Date of Receipt  
06 / 30 / 2016

**Transaction ID : C21855312A**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

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

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

150.00



**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 42
	<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)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : C21855312AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00**

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Priscilla Gilman**

Mailing Address **4538 Deer Run**

City **Evans** State **GA** Zip Code **30809-4446**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **596.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : C21855315A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00**

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : C21855315AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00**

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_ **25.00**

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 18 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kate Lear**

Mailing Address 300 Centreal Park West #8F

City New York State NY Zip Code 10024

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

Name of Employer Self Occupation Writer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : C21855329A**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4943.34

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : C21855329AB**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Dana Levenberg**

Mailing Address 18 Emwilton Place

City Ossining State NY Zip Code 10562-4810

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

Name of Employer Assemblywoman Sandy Galef Occupation Chief of Staff

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2016

**Transaction ID : C21855309A**

Amount of Each Receipt this Period  
125.00

Memo Item

\* Earmarked Contribution: See Below

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

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

625.00

**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 19 OF 42
	<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)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**4943.34**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2016

**Transaction ID : C21855309AB**

Amount of Each Receipt this Period  

125.00
--------

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Elisabeth Lisette Nayor**

Mailing Address **72 Apple Lane**

City **Briarcliff** State **NY** Zip Code **10510-1004**

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

Name of Employer **Bet Torah** Occupation **educator**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**230.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		22		2016

**Transaction ID : C21846174A**

Amount of Each Receipt this Period  

25.00
-------

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**4943.34**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		28		2016

**Transaction ID : C21846174AB**

Amount of Each Receipt this Period  

25.00
-------

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

25.00

**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Elisabeth Lisette Naylor**

Mailing Address 72 Apple Lane

City Briarcliff State NY Zip Code 10510-1004

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

Name of Employer Bet Torah Occupation educator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : C21855311A**

Amount of Each Receipt this Period  
 10.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : C21855311AB**

Amount of Each Receipt this Period  
 10.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Richard Propper**

Mailing Address 99 Brush Hollow Close

City Rye Brook State NY Zip Code 10573-1603

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

Name of Employer Orkin's Affiliates Occupation Real Estate Ownership

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : C21855313A**

Amount of Each Receipt this Period  
 100.00

Memo Item

\* Earmarked Contribution: See Below

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

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

110.00



**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peg Yorkin**

Mailing Address 21348 Pacific Coast Highway

City Malibu State CA Zip Code 90265-5203

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

Name of Employer retired Occupation none

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **721.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2016

**Transaction ID : C21836373A**

Amount of Each Receipt this Period  
 15.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : C21836373AB**

Amount of Each Receipt this Period  
 15.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Peg Yorkin**

Mailing Address 21348 Pacific Coast Highway

City Malibu State CA Zip Code 90265-5203

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

Name of Employer retired Occupation none

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **721.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016

**Transaction ID : C21846152A**

Amount of Each Receipt this Period  
 100.00

Memo Item

\* Earmarked Contribution: See Below

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

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

115.00

**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 42
	<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)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21846152AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Peg Yorkin**

Mailing Address **21348 Pacific Coast Highway**

City **Malibu** State **CA** Zip Code **90265-5203**

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

Name of Employer **retired** Occupation **none**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **721.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21855293A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21855293AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 24 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peg Yorkin**

Mailing Address 21348 Pacific Coast Highway

City Malibu State CA Zip Code 90265-5203

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

Name of Employer retired Occupation none

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **721.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21855294A**

Amount of Each Receipt this Period  
 125.00

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21855294AB**

Amount of Each Receipt this Period  
 125.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Peg Yorkin**

Mailing Address 21348 Pacific Coast Highway

City Malibu State CA Zip Code 90265-5203

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

Name of Employer retired Occupation none

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **721.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2016

**Transaction ID : C21855304A**

Amount of Each Receipt this Period  
 200.00

Memo Item

\* Earmarked Contribution: See Below

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

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

325.00



**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 42
	<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)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4943.34**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : C21855304AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200.00**

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

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) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

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

Memo Item

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

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) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

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

Memo Item

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

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

\_\_\_\_\_ **0.00**

\_\_\_\_\_ **27525.00**

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

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

FOR LINE NUMBER: PAGE 26 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL AC**

Mailing Address 1133 CONNECTICUT AVE NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00411553**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 24 / 2016

**Transaction ID : C21844343**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Federation of Teachers Committee on Polit**

Mailing Address 555 New Jersey Ave NW

City Washington State DC Zip Code 20001-2029

FEC ID number of contributing federal political committee. **C C00028860**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : C21845836**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2000 Westchester Ave

City Purchase State NY Zip Code 10577-2530

FEC ID number of contributing federal political committee. **C C00478099**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : C21859303**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

11000.00

**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 42
	<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)  
**Nita Lowey for Congress**

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

Mailing Address 100 Park Ave

City State Zip Code  
Florham Park NJ 07932-1049

FEC ID number of contributing federal political committee. **C C00340075**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21844958**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ENDO PHARMACEUTICALS INC POLITICAL ACTION COMMITTEE (ENDO PAC)**

Mailing Address 1400 ATWATER DRIVE

City State Zip Code  
MALVERN PA 19355

FEC ID number of contributing federal political committee. **C C00452052**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2016

**Transaction ID : C21827174**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COM**

Mailing Address 300 M St SE  
Ste 350

City State Zip Code  
Washington DC 20003-3436

FEC ID number of contributing federal political committee. **C C00325092**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2016

**Transaction ID : C21827175**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 42
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC

A. Mailing Address 1750 New York Ave NW

City State Zip Code  
Washington DC 20006-5305

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21845837**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

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

Mailing Address 900 7th St NW

City State Zip Code  
Washington DC 20001-3886

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21862018**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

C. Full Name (Last, First, Middle Initial)  
**Investment Company Institute**

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00105981**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21853915**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

**8500.00**

**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 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**K & L Gates Political Action Committee**

Mailing Address 1601 K St NW  
Ste 500

City Washington State DC Zip Code 20006-1682

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : C21844336**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moran for Congress**

Mailing Address PO BOX 83142

City GAITHERSBURG State MD Zip Code 20883

FEC ID number of contributing federal political committee. **C C00241349**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : C21844341**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NARAL Pro-Choice America PAC**

Mailing Address 1156 15th St NW  
Ste 700

City Washington State DC Zip Code 20005-1744

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21846146**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**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 30 OF 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Air Traffic Controllers Association PAC**

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2016**

**Transaction ID : C21846145**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2016**

**Transaction ID : C21836801**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE**

Mailing Address 469 Hospital Dr Ste C

City Gastonia State NC Zip Code 28054-4779

FEC ID number of contributing federal political committee. **C C00405555**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2016**

**Transaction ID : C21862007**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**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 31 OF 42
	<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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16th St NW  
Ste 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21862013**

Amount of Each Receipt this Period  
 3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16th St NW  
Ste 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21862014**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Planned Parenthood Action Fund PAC**

Mailing Address 434 W 33rd St

City New York State NY Zip Code 10001-2601

FEC ID number of contributing federal political committee. **C C00314617**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016

**Transaction ID : C21862009**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SERVICE EMPLOYEES INTERNATIONAL UNION POLITICAL AC**

Mailing Address 1313 L St NW

City Washington State DC Zip Code 20005-4110

FEC ID number of contributing federal political committee. **C C00004036**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : C21836383**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL ACTION COMMITTEE (TTD/PAC)**

Mailing Address 815 16th St NW  
 FI 4

City Washington State DC Zip Code 20006-4101

FEC ID number of contributing federal political committee. **C C00280909**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2016

**Transaction ID : C21844339**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**U. S. TRAVEL ASSOCIATION PAC**

Mailing Address 1100 New York Ave NW  
 Ste 450W

City Washington State DC Zip Code 20005-3934

FEC ID number of contributing federal political committee. **C C00457754**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2016

**Transaction ID : C21835741**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

7500.00

49500.00





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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 42	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2016
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 5.87
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D644959</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2016
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 1.44
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D645134</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Actblue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 97.81
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D645213</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	105.12
<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 35 OF 42			
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Actblue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016
Mailing Address 14 Arrow St			Amount of Each Disbursement this Period 30.18
City Cambridge	State MA	Zip Code 02138-5106	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Transaction ID : D645528</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address 14 Arrow St			Amount of Each Disbursement this Period 60.33
City Cambridge	State MA	Zip Code 02138-5106	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Transaction ID : D645529</b>
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Fedex</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2016
Mailing Address PO Box 1140			Amount of Each Disbursement this Period 30.92
City Memphis	State TN	Zip Code 38101	
Purpose of Disbursement Deliveries		Category/ Type	<input type="checkbox"/> Memo Item
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)		<b>Transaction ID : D645884</b>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	121.43
<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 36 OF 42	
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jewish Media Group</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2016	
Mailing Address 1086 Teaneck Rd			Amount of Each Disbursement this Period 312.00	
City Teaneck	State NJ	Zip Code 07666-4854	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Journal Advertisement		Category/ Type		
Candidate Name		Transaction ID : <b>D645890</b>		
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>B. Jewish Post</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2016	
Mailing Address 7016 18th Ave			Amount of Each Disbursement this Period 500.00	
City Brooklyn	State NY	Zip Code 11204-5201	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Journal Advertisement		Category/ Type		
Candidate Name		Transaction ID : <b>D645892</b>		
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. Optimum</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2016	
Mailing Address 1111 Stewart Ave			Amount of Each Disbursement this Period 540.86	
City Bethpage	State NY	Zip Code 11714-3533	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Telephone Service		Category/ Type		
Candidate Name		Transaction ID : <b>D645894</b>		
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).....	1352.86
<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 37 OF 42			
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016
Mailing Address 700 Red Brook Blvd Ste 200		Amount of Each Disbursement this Period 58.00
City Owings Mills	State MD	
Zip Code 21117-5185	Purpose of Disbursement Payroll Fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D645888</b>
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>B. Suntrust Merchant Services</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2016
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 127.31
City Hagerstown	State MD	
Zip Code 21741-6600	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D645893</b>
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. Twenty First Century Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2016
Mailing Address 434 New Jersey Ave SE		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20003-4008	Purpose of Disbursement Site Rental/Catering	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	<b>Transaction ID : D645889</b>
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).....	1185.31
<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 38 OF 42			
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Utrecht, Kleinfeld, Fiori, Partners</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2016		
Mailing Address 1900 M St NW Ste 500			Amount of Each Disbursement this Period 525.00		
City Washington	State DC	Zip Code 20036-3522	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Legal Services		Category/ Type			
Candidate Name			Transaction ID : D645896		
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>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2016		
Mailing Address PO Box 489			Amount of Each Disbursement this Period 215.60		
City Newark	State NJ	Zip Code 07101	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Cell Phone Service		Category/ Type			
Candidate Name			Transaction ID : D645886		
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. American Express</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016		
Mailing Address PO Box 1270			Amount of Each Disbursement this Period 656.67		
City Newark	State NJ	Zip Code 07101-1270	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Credit Card Payment		Category/ Type			
Candidate Name			Transaction ID : D645885		
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).....	1397.27
<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 39 OF 42			
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. At&amp;t Onenet Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>PO Box 830017</b>		Amount of Each Disbursement this Period <b>25.00</b>
City <b>Baltimore</b>	State <b>MD</b> Zip Code <b>21283-0017</b>	
Purpose of Disbursement <b>Telecommunication Services</b>	Candidate Name	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : D645887</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Exxonmobil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>339 Pennsylvania Ave SE</b>		Amount of Each Disbursement this Period <b>39.34</b>
City <b>Washington</b>	State <b>DC</b> Zip Code <b>20003-1148</b>	
Purpose of Disbursement <b>Travel</b>	Candidate Name	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : D645891</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Menus Catering</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2016</b>
Mailing Address <b>655 Taylor St NE</b>		Amount of Each Disbursement this Period <b>534.16</b>
City <b>Washington</b>	State <b>DC</b> Zip Code <b>20017-2063</b>	
Purpose of Disbursement <b>Catering</b>	Candidate Name	<input checked="" type="checkbox"/> Memo Item <b>Transaction ID : D645900</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</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 40 OF 42	
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Onstar Services</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2016
Mailing Address PO Box 1027		Amount of Each Disbursement this Period 39.67
City Warren	State MI	
Zip Code 48090-1027	Purpose of Disbursement Campaign auto service subscription	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : D645895</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ditto Consulting Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 428 W 23rd St Apt 2B		Amount of Each Disbursement this Period 772.09
City New York	State NY	
Zip Code 10011-2142	Purpose of Disbursement Reimbursement, see below	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : D645897</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Restaurant X</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 117 N Route 303		Amount of Each Disbursement this Period 400.00
City Nyack	State NY	
Zip Code 10960	Purpose of Disbursement Gift Certificates for Volunteers	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : D645906</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	772.09
<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 41 OF 42	
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 500 Staples Dr		Amount of Each Disbursement this Period 325.09
City Framingham	State MA	
Zip Code 01702-4478	Purpose of Disbursement Office Supplies	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : D645905</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2016
Mailing Address 620 Mamaroneck Ave		Amount of Each Disbursement this Period 47.00
City White Plains	State NY	
Zip Code 10605-2006	Purpose of Disbursement Postage	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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)	<b>Transaction ID : D645904</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
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).....	4934.08

**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 42 OF 42	
	<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)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 14 / 2016</b>
Mailing Address <b>430 S Capitol St SE</b>		Amount of Each Disbursement this Period <b>250000.00</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4024</b>	Purpose of Disbursement <b>Unlimited Transfer</b>	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)	<b>Transaction ID : D645901</b>
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	<input type="checkbox"/> Memo Item
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	<input type="checkbox"/> Memo Item
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) .....	<b>250000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>250000.00</b>