

SECRETARY OF THE SENATE
10 OCT 21 PM 4:47

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

Empire Political Action Committee

ADDRESS (number and street) PO Box 15033

Check if different than previously reported. (ACC)

Washington DC 20003

2. FEC IDENTIFICATION NUMBER **C00477067**

CITY STATE ZIPCODE

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

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

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

Election on _____ in the State of _____

(d) 30-Day Post-Election Report for the:

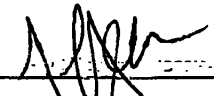
- General (30G)
- Runoff (30R)
- Special (30S)

Election on _____ in the State of _____

5. Covering Period 2010 through 2010

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 Jessica TeSelle

Signature of Treasurer  Date 2010

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)

1003047403

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
 Empire Political Action Committee

Report Covering the Period: From:

MM	DD	YYYY
07	01	2010

 To:

MM	DD	YYYY
09	30	2010

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>YYYY</td></tr><tr><td>2010</td></tr></table>	YYYY	2010	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="height: 20px;"> </td></tr></table>		<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">0.00</td></tr></table>	0.00
YYYY						
2010						
0.00						
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">1703.25</td></tr></table>	1703.25				
1703.25						
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">23000.00</td></tr></table>	23000.00	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">42000.00</td></tr></table>	42000.00		
23000.00						
42000.00						
(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 style="text-align: right;">24703.25</td></tr></table>	24703.25	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">42000.00</td></tr></table>	42000.00		
24703.25						
42000.00						
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">18213.00</td></tr></table>	18213.00	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">35509.75</td></tr></table>	35509.75		
18213.00						
35509.75						
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 style="text-align: right;">6490.25</td></tr></table>	6490.25	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">6490.25</td></tr></table>	6490.25		
6490.25						
6490.25						
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: right;">0.00</td></tr></table>	0.00				
0.00						
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="text-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

1003047404

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name
Empire Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	W	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	W	Y
2	0	1	0

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		
(i) Itemized (use Schedule A)	1000.00	20000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	1000.00	20000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	22000.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	23000.00	42000.00
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))	23000.00	42000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23000.00	42000.00

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	13.00	109.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	13.00	109.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18200.00	35400.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(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))..	18213.00	35509.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18213.00	35509.75

DETAILED SUMMARY PAGE

of Disbursements

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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)	23000.00	42000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23000.00	42000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13.00	109.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13.00	109.75

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

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

A. Full Name (Last, First, Middle Initial) William Gates, III	Date of Receipt
	07 / 30 / 2010
Mailing Address PO Box 97000	Transaction ID: SA11AI.4214
City State Zip Code Kirkland WA 98083	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Occupation Microsoft Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

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SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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

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

FOR LINE NUMBER: PAGE 7 / 14
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A.

Full Name (Last, First, Middle Initial) BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)		Date of Receipt MM / DD / YYYY 07 / 30 / 2010
Mailing Address 1300 North 17th Street Suite 1400		Transaction ID: SA11C.4213
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address 1300 North 17th Street Suite 1400		Transaction ID: SA11C.4171
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee C	Amount of Each Receipt this Period 4000.00	
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL		Date of Receipt MM / DD / YYYY 09 / 30 / 2010
Mailing Address 1701 JFK Blvd, 49th Floor 35th Floor		Transaction ID: SA11C.4165
City Philadelphia	State PA	Zip Code 19103
FEC ID number of contributing federal political committee C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

1003047409

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

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

FOR LINE NUMBER: PAGE 8 / 14

(check only one)

<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input checked="" type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A. Full Name (Last, First, Middle Initial) COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE, THE Mailing Address 701 Pennsylvania Avenue, NW Suite 750 City State Zip Code Washington DC 20004 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2010 Transaction ID: SA11C.4164 Amount of Each Receipt this Period 1500.00 Contribution
B. Full Name (Last, First, Middle Initial) Honeywell International PAC Mailing Address 101 Constitution Ave NW Suite 500 W City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2010 Transaction ID: SA11C.4147 Amount of Each Receipt this Period 5000.00
C. Full Name (Last, First, Middle Initial) International Brotherhood of Electrical Workers Mailing Address 900 Seventh Street NW City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 08 / 19 / 2010 Transaction ID: SA11C.4149 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional) ▶		11500.00
TOTAL This Period (last page this line number only) ▶		

1003047410

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

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

FOR LINE NUMBER: PAGE 9 / 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A. Full Name (Last, First, Middle Initial)
National Air Traffic Controller's Association PAC

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005

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 08 / 18 / 2010

Transaction ID: SA11C.4152

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2010

Transaction ID: SA11C.4167

Amount of Each Receipt this Period 2500.00

Contribution

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Blvd Suite 1500

City Arlington State VA Zip Code 22209

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 09 / 30 / 2010

Transaction ID: SA11C.4169

Amount of Each Receipt this Period 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

TOTAL This Period (last page this line number only) ▶ 22000.00

1003047411

**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)

PAGE 10 / 14

<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

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A.

Full Name (Last, First, Middle Initial)
ARCURI FOR CONGRESS

Transaction ID: SB23.4184
Date of Disbursement
09 / 30 / 2010

Mailing Address P.O. Box 8508

Amount of Each Disbursement this Period
1000.00

City Utica State NY Zip Code 13505

Purpose of Disbursement Contribution
011 Category/Type

Candidate Name MICHAEL A. ARCURI

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 24

B.

Full Name (Last, First, Middle Initial)
BILL OWENS FOR CONGRESS

Transaction ID: SB23.4178
Date of Disbursement
09 / 30 / 2010

Mailing Address PO Box 1575

Amount of Each Disbursement this Period
1000.00

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement Contribution
011 Category/Type

Candidate Name BILL OWENS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 23

C.

Full Name (Last, First, Middle Initial)
CHRIS COONS FOR DELAWARE

Transaction ID: SB23.4204
Date of Disbursement
09 / 30 / 2010

Mailing Address PO BOX 9900

Amount of Each Disbursement this Period
1000.00

City NEWARK State DE Zip Code 19714

Purpose of Disbursement Contributions
011 Category/Type

Candidate Name CHRISTOPHER A COONS

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: DE District: 00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

1003047412

**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)

PAGE 11 / 14

<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

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement Contribution 011</p> <p>Candidate Name COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼</p> <p>State: NY District: 12</p>	<p>Transaction ID: SB23.4145 Date of Disbursement 08 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID</p> <p>Mailing Address P.O. BOX 19163</p> <p>City LAS VEGAS State NV Zip Code 89132</p> <p>Purpose of Disbursement Contribution 011</p> <p>Candidate Name HARRY REID</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼</p> <p>State: NV District: 00</p>	<p>Transaction ID: SB23.4161 Date of Disbursement 09 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER</p> <p>Mailing Address PO BOX 411176</p> <p>City LOS ANGELES State CA Zip Code 90041</p> <p>Purpose of Disbursement Contribution 011</p> <p>Candidate Name BARBARA BOXER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼</p> <p>State: CA District: 00</p>	<p>Transaction ID: SB23.4209 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6800.00

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

1003047413

**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)

PAGE 12 / 14

<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

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) FRIENDS OF DAN MAFFEI</p> <p>Mailing Address PO Box 74</p> <p>City Syracuse State NY Zip Code 13214</p> <p>Purpose of Disbursement Contribution 011 Category/ Type</p> <p>Candidate Name DANIEL BENJAMIN MR. MAFFEI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NY District: 25</p>	<p>Transaction ID: SB23.4196 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS</p> <p>Mailing Address PO Box 12886</p> <p>City Tucson State AZ Zip Code 85732</p> <p>Purpose of Disbursement Contribution 011 Category/ Type</p> <p>Candidate Name GABRIELLE GIFFORDS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AZ District: 08</p>	<p>Transaction ID: SB23.4200 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) JOHN HALL FOR CONGRESS</p> <p>Mailing Address PO Box 469</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Contribution 011 Category/ Type</p> <p>Candidate Name JOHN JOSEPH HALL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NY District: 19</p>	<p>Transaction ID: SB23.4192 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

1003047414

**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

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A.

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

Mailing Address 66 Arnold Street

City Staten Island State NY Zip Code 10301

Purpose of Disbursement Contribution
Candidate Name MICHAEL E. MR. MCMAHON

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 13

Transaction ID: SB23.4175
Date of Disbursement 09 / 30 / 2010

Amount of Each Disbursement this Period 1000.00

011 Category/Type

B.

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

Mailing Address 5 South Side Dr. #224

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement Contribution
Candidate Name SCOTT M MURPHY

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.4156
Date of Disbursement 08 / 18 / 2010

Amount of Each Disbursement this Period 2400.00

011 Category/Type

C.

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

Mailing Address 5 South Side Dr. #224

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement Contribution
Candidate Name SCOTT M MURPHY

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Transaction ID: SB23.4188
Date of Disbursement 09 / 30 / 2010

Amount of Each Disbursement this Period 1000.00

011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ► 4400.00

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

10030474415

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 14

<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

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NAME OF COMMITTEE (In Full)
Empire Political Action Committee

A.	Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS		Transaction ID: SB23.4181	
	Mailing Address PO Box 437		Date of Disbursement 09 / 30 / 2010	
City Farmingville		State NY	Zip Code 11738	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution			011 Category/ Type	
Candidate Name TIMOTHY BISHOP				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 01				

10030474416

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	18200.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

10030474417

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input checked="" type="checkbox"/> Received from Senate Public Records Office	Date of Receipt <i>10/25/10</i>
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

<i>Jm 10</i>	<i>10/25/10</i>
PREPARER	DATE PREPARED