

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

Sakima for Congress

ADDRESS (number and street)

P.O. Box 1603

Check if different than previously reported. (ACC)

Poughkeepsie

NY

12601

2. FEC IDENTIFICATION NUMBER ▼

C C00587782

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NY

18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2016

through

M M / D D / Y Y Y Y
03 / 31 / 2016

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 Robert Mortell

Signature of Treasurer Robert Mortell

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 01 / 2016

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Sakima 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))....	61389.88	68763.46
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61389.88	68763.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35284.53	41579.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	35284.53	41579.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27601.34	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	47492.83	

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

Sakima for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20915.00	25015.00
(ii) Unitemized.....	40374.88	42163.74
(iii) TOTAL of contributions from individuals ▶	61289.88	67178.74
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	100.00	1584.72
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61389.88	68763.46
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	1000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	1000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	2.00	2.43
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	61391.88	69765.89

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35284.53	41579.55
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	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	400.00	585.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35684.53	42164.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1893.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61391.88
25. SUBTOTAL (add Line 23 and Line 24).....	63285.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35684.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	27601.34

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

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

FOR LINE NUMBER: PAGE 5 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Maxwell Belding

Mailing Address 30 Bokum Road Unit 308

City Essex State CT Zip Code 06426

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11AI.4345

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Elizabeth Mallinckrodt Bryden

Mailing Address 1 West 67th Street

City New York State NY Zip Code 10023-6200

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
305.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11AI.4308

Amount of Each Receipt this Period
305.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Elizabeth Mallinckrodt Bryden

Mailing Address 1 West 67th Street

City New York State NY Zip Code 10023-6200

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
560.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 22 / 2016

Transaction ID : SA11AI.4507

Amount of Each Receipt this Period
255.00

Memo Item

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

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

810.00

**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 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth Mallinckrodt Bryden

Mailing Address 1 West 67th Street

City State Zip Code
New York NY 10023-6200

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
765.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2016

Transaction ID : SA11AI.5053

Amount of Each Receipt this Period
205.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Anthony Burke

Mailing Address 1 Bevin Road W

City State Zip Code
Northport NY 11768

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.5329

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Shirley Caldwell

Mailing Address PO Box 2800

City State Zip Code
Albany TX 76430

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : SA11AI.4589

Amount of Each Receipt this Period
250.00

Memo Item

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

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

705.00

**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 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Terry Carmody

Mailing Address 180 Jackson Avenue

City Pelham Manor State NY Zip Code 10803

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

Name of Employer IMI Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2016

Transaction ID : SA11AI.5230

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Charles Carrig

Mailing Address 15937 Woodland Drive

City Dearborn State MI Zip Code 48120

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : SA11AI.5177

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Arthur Cecchini

Mailing Address 27 Meadow Lane

City Garrison State NY Zip Code 10524

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

Name of Employer Valad Electric Heating Corp Occupation Electrical Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 29 / 2016

Transaction ID : SA11AI.5236

Amount of Each Receipt this Period
250.00

Memo Item

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Pat Dahlstedt

Mailing Address 13048 Farm to Market Road

City State Zip Code
Mount Vernon WA 98273

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

Name of Employer Occupation
Self Employed House Wife

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2016

Transaction ID : SA11AI.4420

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Matthew Desalvo

Mailing Address 52 Dawn Harbor Lane

City State Zip Code
Riverside CT 06878

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

Name of Employer Occupation
Mizuho Ranking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : SA11AI.4339

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
R Elefson

Mailing Address N6616 County Road O

City State Zip Code
River Falls WI 54022

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

Name of Employer Occupation
Retired Economist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 10 / 2016

Transaction ID : SA11AI.4422

Amount of Each Receipt this Period
250.00

Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 9 OF 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
12	13a	13b	14	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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Richard Foley

Mailing Address **PMB 310**
42 Lake Avenue Extension

City **Danbury** State **CT** Zip Code **06811**

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

Name of Employer **Self Employed** Occupation **Campaign Consultant**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period
126.56

Memo Item
Fundraising Supplies - Reimbursed

B. Full Name (Last, First, Middle Initial)
Richard Foley

Mailing Address **PMB 310**
42 Lake Avenue Extension

City **Danbury** State **CT** Zip Code **06811**

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

Name of Employer **Self Employed** Occupation **Campaign Consultant**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2015

Transaction ID : SA11AI.4326

Amount of Each Receipt this Period
9.57

Memo Item
Fundraising Supplies - Reimbursed

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

Mailing Address **PMB 310**
42 Lake Avenue Extension

City **Danbury** State **CT** Zip Code **06811**

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

Name of Employer **Self Employed** Occupation **Campaign Consultant**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2016

Transaction ID : SA11AI.4324

Amount of Each Receipt this Period
73.37

Memo Item
Campaign Banner - Reimbursed

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

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

0.00

**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 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Bruce Garnand

Mailing Address 1213 Luisa Street

City Santa Fe State NM Zip Code 87505

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4341

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bruce Garnand

Mailing Address 1213 Luisa Street

City Santa Fe State NM Zip Code 87505

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2016

Transaction ID : SA11AI.5064

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Walter J Gatti

Mailing Address 2060 South Patrick Drive

City Indian Harbour Beach State FL Zip Code 32937

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

Name of Employer Tensor Eng Co Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.5152

Amount of Each Receipt this Period
250.00

Memo Item

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

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

600.00

**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 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Louis Giordano

Mailing Address 1135 Bridge Pointe Lane

City Yorktown Heights State NY Zip Code 10598-6208

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

Name of Employer Croton Auto Park Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11AI.4320

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Louis Giordano

Mailing Address 1135 Bridge Pointe Lane

City Yorktown Heights State NY Zip Code 10598-6208

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

Name of Employer Croton Auto Park Occupation Auto Dealer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2016

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address PO Box 91610

City Lafayette State LA Zip Code 70509

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

Name of Employer Self Employed Occupation Investor

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
 02 / 10 / 2016

Transaction ID : SA11AI.4416

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).....

950.00

**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 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Richard Griffith

Mailing Address **PO Box 91610**

City **Lafayette** State **LA** Zip Code **70509**

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

Name of Employer **Self Employed** Occupation **Investor**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2016

Transaction ID : SA11AI.5116

Amount of Each Receipt this Period
150.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Thomas Hayward

Mailing Address **900 University Street Apt 4E**

City **Seattle** State **WA** Zip Code **98101**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 22 / 2016

Transaction ID : SA11AI.4505

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
William B. Hotaling

Mailing Address **125 Quassaick Avenue**

City **New Windsor** State **NY** Zip Code **12553-6635**

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

Name of Employer **Retired** Occupation **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
01 / 14 / 2016

Transaction ID : SA11AI.4241

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).....

900.00

**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 53
	<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)
Sakima for Congress

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

Mailing Address 125 Quassaick Avenue

City New Windsor State NY Zip Code 12553-6635

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

Name of Employer Retired Occupation 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
 03 / 25 / 2016

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Paul J Isaac

Mailing Address 75 Prospect Avenue

City Larchmont State NY Zip Code 10538

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

Name of Employer Arbiter Partners Capital Manag Occupation Analyst

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
 01 / 23 / 2016

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
John Jaeger

Mailing Address 3 Old Lake Road

City Congers State NY Zip Code 10920

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2016

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Ann Johnson

Mailing Address 703 Island Drive

City State Zip Code
Palm Beach FL 33480

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
2700.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 19 / 2016

Transaction ID : SA11AI.4503

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Linda G Kendall

Mailing Address 50 Club House Road

City State Zip Code
Key Largo FL 33037-3600

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

Name of Employer Occupation
Followup sent 1/16/16 Followup sent 1/16/16

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 16 / 2016

Transaction ID : SA11AI.4251

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Sriprakash Kothari

Mailing Address 11 Walnut Street

City State Zip Code
Lexington MA 02421

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

Name of Employer Occupation
MIT Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2016

Transaction ID : SA11AI.4405

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).....

4700.00

**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 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Stephen J Lehrman

Mailing Address 100 Upper Lake Shore Drive

City State Zip Code
Katonah NY 10536

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

Name of Employer Occupation
Lehrman, Lehrman, & Guterman, Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Allen Lowrie

Mailing Address 238 F Z Goss Road

City State Zip Code
Picayune MS 39466

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

Name of Employer Occupation
Followup Request Sent Followup Request Sent

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
 03 / 25 / 2016

Transaction ID : SA11AI.5132

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 515 Haight Avenue

City State Zip Code
Poughkeepsie NY 12603-2468

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11AI.4318

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 16 OF 53
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Aaron McWhorter

Mailing Address 1490 Black Dirt Road

City Whitesburg State GA Zip Code 30185

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

Name of Employer NG Turf, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2016

Transaction ID : SA11AI.4316

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 600 Route 25A

City East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Tech Occupation Financial Advisor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2016

Transaction ID : SA11AI.4236

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
T Messner

Mailing Address 40 East 84th Street

City New York State NY Zip Code 10028

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

Name of Employer GAM DOT TV LLC Occupation Writer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2016

Transaction ID : SA11AI.4418

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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: (check only one)	PAGE 17 OF 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Edith Palmer

Mailing Address 282 Laroe Road

City Chester State NY Zip Code 10918

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

Name of Employer Retired Occupation 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
 01 / 08 / 2016

Transaction ID : SA11AI.4225

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Edith Palmer

Mailing Address 282 Laroe Road

City Chester State NY Zip Code 10918

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

Name of Employer Retired Occupation 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
 02 / 17 / 2016

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Edith Palmer

Mailing Address 282 Laroe Road

City Chester State NY Zip Code 10918

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : SA11AI.4565

Amount of Each Receipt this Period
100.00

Memo Item

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 53
	<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)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. H Recknagel		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 375 State Road 67 Apt 258		Transaction ID : SA11AI.5327	
City State Zip Code Dousman WI 53118	Amount of Each Receipt this Period _____ 2500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item		
Name of Employer Occupation Retired Retired	Election Cycle-to-Date _____ 2500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Richard Richman		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 2831 Double Eagle Drive		Transaction ID : SA11AI.5333	
City State Zip Code Dayton OH 45431	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item		
Name of Employer Occupation Irongate Realtors Real Estate Broker	Election Cycle-to-Date _____ 300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Jack H Roberts		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2016	
Mailing Address 1110 Wilson Hollow Road		Transaction ID : SA11AI.4494	
City State Zip Code Waitsburg WA 99361-8790	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item		
Name of Employer Occupation Retired Retired	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	_____ 3100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 53
	<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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
William Snyder

Mailing Address 555 5th Avenue NE

City St Petersburg	State FL	Zip Code 33701
-----------------------	-------------	-------------------

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

Name of Employer Retired	Occupation 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
 02 / 11 / 2016

Transaction ID : SA11AI.4414

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Patrick J Sullivan

Mailing Address 1090 Prospect Avenue

City Hartford	State CT	Zip Code 06105
------------------	-------------	-------------------

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

Name of Employer Followup Letter sent on 1/8/16	Occupation Followup Letter sent on 1/8/16
--	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2016

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Henry Willard

Mailing Address PO Box 3269

City Shepherdstown	State WV	Zip Code 25443
-----------------------	-------------	-------------------

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.5175

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1000.00

20915.00

**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 53
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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)
Sakima for Congress

A. Full Name (Last, First, Middle Initial)
Sakima Brown

Mailing Address 43 South Clinton Street

City Poughkeepsie State NY Zip Code 12601

FEC ID number of contributing federal political committee. **C** H6NY18161

Name of Employer NY Senate Occupation Community Outreach

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2584.72

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2016

Transaction ID : SA11D.4245

Amount of Each Receipt this Period
100.00

Memo Item
 In-kind - Print Advertising

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 / 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 / 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).....

100.00

100.00

**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 21 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Sakima Brown		Date of Disbursement MM / DD / YYYY 02 / 06 / 2016
Mailing Address 43 South Clinton Street		Amount of Each Disbursement this Period 100.00
City Poughkeepsie	State NY Zip Code 12601	
Purpose of Disbursement In-kind - Print Advertising	Category/Type	<input type="checkbox"/> Memo Item Transaction ID : SB17.4246
Candidate Name		
Office Sought: <input checked="" 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: NY District: 18		

Full Name (Last, First, Middle Initial) B. Campaign Funding Direct, Inc.		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road #490		Amount of Each Disbursement this Period 8000.00
City McLean	State VA Zip Code 22102	
Purpose of Disbursement Fundraising	Category/Type 003	<input type="checkbox"/> Memo Item Transaction ID : SB17.4603
Candidate Name Sakima for Congress		
Office Sought: <input checked="" 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: NY District: 18		

Full Name (Last, First, Middle Initial) c. Campaign Funding Direct, Inc.		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1420 Spring Hill Road #490		Amount of Each Disbursement this Period 635.00
City McLean	State VA Zip Code 22102	
Purpose of Disbursement Direct mail services - PO Box	Category/Type 003	<input type="checkbox"/> Memo Item Transaction ID : SB17.4578
Candidate Name Sakima for Congress		
Office Sought: <input checked="" 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: NY District: 18		

SUBTOTAL of Disbursements This Page (optional).....	8735.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Colortree Group, Inc.		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 8000 Villa Park Drive		Amount of Each Disbursement this Period 693.00 <input type="checkbox"/> Memo Item
City Richmond	State VA	
Zip Code 23228	Purpose of Disbursement Printing	Transaction ID : SB17.4604
Candidate Name Sakima for Congress	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: NY	District: 18	

Full Name (Last, First, Middle Initial) B. Colortree Group, Inc.		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 8000 Villa Park Drive		Amount of Each Disbursement this Period 759.00 <input type="checkbox"/> Memo Item
City Richmond	State VA	
Zip Code 23228	Purpose of Disbursement Printing	Transaction ID : SB17.4606
Candidate Name Sakima for Congress	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: NY	District: 18	

Full Name (Last, First, Middle Initial) C. CP Direct		Date of Disbursement MM / DD / YYYY 02 / 17 / 2016
Mailing Address 4600A Boston Way		Amount of Each Disbursement this Period 5532.45 <input type="checkbox"/> Memo Item
City Lanham	State MD	
Zip Code 20706	Purpose of Disbursement Printing	Transaction ID : SB17.4607
Candidate Name Sakima for Congress	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: NY	District: 18	

SUBTOTAL of Disbursements This Page (optional).....	6984.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial)
A. ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement Direct mail services Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 02 / 17 / 2016

Amount of Each Disbursement this Period: 549.98

Memo Item

Transaction ID : SB17.4611

Full Name (Last, First, Middle Initial)
B. Richard Foley

Mailing Address PMB 310
42 Lake Avenue Extension

City Danbury State CT Zip Code 06811

Purpose of Disbursement Reimbursement for Fundraising Supplies & Banner Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 02 / 06 / 2016

Amount of Each Disbursement this Period: 209.50

Memo Item

Transaction ID : SB17.4328

Full Name (Last, First, Middle Initial)
c. Robert Mortell

Mailing Address 31 Garfield Place

City Poughkeepsie State NY Zip Code 12601

Purpose of Disbursement Accounting/Accounting Services Category/Type 001

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 01 / 03 / 2016

Amount of Each Disbursement this Period: 145.00

Memo Item

Transaction ID : SB17.4220

SUBTOTAL of Disbursements This Page (optional) 904.48

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Robert Mortell		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 31 Garfield Place		Amount of Each Disbursement this Period 195.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4300
City Poughkeepsie	State NY	
Zip Code 12601	Purpose of Disbursement Accounting/Accounting Services	Category/ Type 001
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) B. Robert Mortell		Date of Disbursement MM / DD / YYYY 03 / 02 / 2016
Mailing Address 31 Garfield Place		Amount of Each Disbursement this Period 170.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4532
City Poughkeepsie	State NY	
Zip Code 12601	Purpose of Disbursement Accounting/Accounting Services	Category/ Type 001
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 455.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4615
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	Category/ Type 003
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

SUBTOTAL of Disbursements This Page (optional).....	820.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 53			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 455.00
City McLean	State VA	Zip Code 22102
Purpose of Disbursement List Acquisition	Category/Type 003	
Candidate Name Sakima for Congress	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4616	

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 267.29
City McLean	State VA	Zip Code 22102
Purpose of Disbursement List acquisition	Category/Type 003	
Candidate Name Sakima for Congress	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4617	

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 157.58
City McLean	State VA	Zip Code 22102
Purpose of Disbursement List acquisition	Category/Type 003	
Candidate Name Sakima for Congress	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4618	

SUBTOTAL of Disbursements This Page (optional).....	879.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 53			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 94.49
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4619
Office Sought: <input checked="" 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: NY District: 18		

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 75.10
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4620
Office Sought: <input checked="" 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: NY District: 18		

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 68.70
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4621
Office Sought: <input checked="" 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: NY District: 18		

SUBTOTAL of Disbursements This Page (optional).....	238.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 54.20
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4622
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 87.45
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4623
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 163.70
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/ Type 003	Transaction ID : SB17.4624
Office Sought: <input checked="" 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: NY	District: 18	

SUBTOTAL of Disbursements This Page (optional).....	305.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 185.57
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 003	Transaction ID : SB17.4625
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 16.11
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 003	Transaction ID : SB17.4626
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 22.72
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List Acquisition	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 003	Transaction ID : SB17.5686
Office Sought: <input checked="" 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: NY	District: 18	

SUBTOTAL of Disbursements This Page (optional).....	224.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Omega List Company		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 725.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.5687
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List Acquisition	Category/ Type 003
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) B. Omega List Company		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 80.36 <input type="checkbox"/> Memo Item Transaction ID : SB17.5688
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List Acquisition	Category/ Type 003
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) c. Omega List Company		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1420 Spring Hill Road, Suite 490		Amount of Each Disbursement this Period 212.80 <input type="checkbox"/> Memo Item Transaction ID : SB17.5689
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement List Acquisition	Category/ Type 003
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

SUBTOTAL of Disbursements This Page (optional).....	1018.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Spectrum Marketing Companies		Date of Disbursement MM / DD / YYYY 01 / 22 / 2016
Mailing Address 95 Eddy Road, Suite 101		Amount of Each Disbursement this Period 564.95
City Manchester	State NH	Zip Code 03102
Purpose of Disbursement Palm Cards	Category/ Type 006	
Candidate Name Sakima for Congress	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4259	

Full Name (Last, First, Middle Initial) B. Spectrum Marketing Companies		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address 95 Eddy Road, Suite 101		Amount of Each Disbursement this Period 810.00
City Manchester	State NH	Zip Code 03102
Purpose of Disbursement Lawn Signs	Category/ Type 004	
Candidate Name Sakima for Congress	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4279	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 11 / 13 / 2015
Mailing Address 67 Newton Road		Amount of Each Disbursement this Period 126.56
City Danbury	State CT	Zip Code 06810
Purpose of Disbursement Fundraising Supplies - Reimbursed	Category/ Type 003	
Candidate Name Sakima for Congress	Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input checked="" 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: NY District: 18	Transaction ID : SB17.4332	

SUBTOTAL of Disbursements This Page (optional).....	1374.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 67 Newton Road		Amount of Each Disbursement this Period 9.57
City Danbury State CT Zip Code 06810	Purpose of Disbursement Fundraising Supplies - Reimbursed 003 Category/Type	
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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)	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.4331
State: NY District: 18		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2016
Mailing Address 67 Newton Road		Amount of Each Disbursement this Period 73.37
City Danbury State CT Zip Code 06810	Purpose of Disbursement Banner - Reimbursed 004 Category/Type	
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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)	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.4329
State: NY District: 18		

Full Name (Last, First, Middle Initial) c. The Prince Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2016
Mailing Address PMB 310 42 Lake Avenue Extension		Amount of Each Disbursement this Period 3000.00
City Danbury State CT Zip Code 06811	Purpose of Disbursement Campaign Consulting 001 Category/Type	
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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)	<input type="checkbox"/> Memo Item Transaction ID : SB17.4588
State: NY District: 18		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Town of Poughkeepsie Republican Committee (TOP GOP)		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address P.O. Box 1942		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4274
City Poughkeepsie	State NY	
Zip Code 12601	Purpose of Disbursement Political Contribution - Fundraiser Sponsor	Category/ Type 011
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) B. Tuesday Associates		Date of Disbursement MM / DD / YYYY 01 / 08 / 2016
Mailing Address 60 New Driftway, Suite 18		Amount of Each Disbursement this Period 622.07 <input type="checkbox"/> Memo Item Transaction ID : SB17.4235
City Scituate	State MA	
Zip Code 02066	Purpose of Disbursement Fundraising Supplies - Stationery and Postage	Category/ Type 003
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

Full Name (Last, First, Middle Initial) c. Tuesday Associates		Date of Disbursement MM / DD / YYYY 01 / 12 / 2016
Mailing Address 60 New Driftway, Suite 18		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4238
City Scituate	State MA	
Zip Code 02066	Purpose of Disbursement Campaign Consulting	Category/ Type 001
Candidate Name Sakima for Congress	Office Sought: <input checked="" 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: NY District: 18	

SUBTOTAL of Disbursements This Page (optional).....	2372.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Fundraising Supplies Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 01 / 18 / 2016

Amount of Each Disbursement this Period: 113.68

Memo Item

Transaction ID : SB17.4253

B. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Fundraising - Mailing Supplies Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 01 / 29 / 2016

Amount of Each Disbursement this Period: 654.90

Memo Item

Transaction ID : SB17.4278

c. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Campaign Consulting Category/Type 001

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 02 / 05 / 2016

Amount of Each Disbursement this Period: 1500.00

Memo Item

Transaction ID : SB17.4323

SUBTOTAL of Disbursements This Page (optional) 2268.58

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 53			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. Tuesday Associates			Date of Disbursement MM / DD / YYYY 02 / 14 / 2016
Mailing Address 60 New Driftway, Suite 18			Amount of Each Disbursement this Period 141.87 <input type="checkbox"/> Memo Item Transaction ID : SB17.4397
City Scituate	State MA	Zip Code 02066	
Purpose of Disbursement Fundraising Supplies		Candidate Name Sakima for Congress	Category/ Type 003
Office Sought: <input checked="" 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: NY	District: 18		

Full Name (Last, First, Middle Initial) B. Tuesday Associates			Date of Disbursement MM / DD / YYYY 02 / 27 / 2016
Mailing Address 60 New Driftway, Suite 18			Amount of Each Disbursement this Period 52.92 <input type="checkbox"/> Memo Item Transaction ID : SB17.4500
City Scituate	State MA	Zip Code 02066	
Purpose of Disbursement Fundraising Supplies		Candidate Name Sakima for Congress	Category/ Type 003
Office Sought: <input checked="" 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: NY	District: 18		

Full Name (Last, First, Middle Initial) c. Tuesday Associates			Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 60 New Driftway, Suite 18			Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.4560
City Scituate	State MA	Zip Code 02066	
Purpose of Disbursement Campaign Consulting		Candidate Name Sakima for Congress	Category/ Type 003
Office Sought: <input checked="" 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: NY	District: 18		

SUBTOTAL of Disbursements This Page (optional).....	1694.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Fundraising Supplies Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 03 / 07 / 2016

Amount of Each Disbursement this Period: 791.47

Memo Item

Transaction ID : SB17.4561

B. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Fundraising Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 03 / 12 / 2016

Amount of Each Disbursement this Period: 541.06

Memo Item

Transaction ID : SB17.4587

C. Tuesday Associates

Full Name (Last, First, Middle Initial)
Mailing Address 60 New Driftway, Suite 18

City Scituate State MA Zip Code 02066

Purpose of Disbursement Fundraising Postage Category/Type 003

Candidate Name Sakima for Congress

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

State: NY District: 18

Date of Disbursement: 03 / 26 / 2016

Amount of Each Disbursement this Period: 85.26

Memo Item

Transaction ID : SB17.5150

SUBTOTAL of Disbursements This Page (optional) 1417.79

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 53	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Sakima for Congress

Full Name (Last, First, Middle Initial) A. James Walsh		Date of Disbursement MM / DD / YYYY 02 / 27 / 2016
Mailing Address 20 Church Avenue		Amount of Each Disbursement this Period 1000.00
City Ballston Spa	State NY	
Zip Code 12020	Purpose of Disbursement Legal Consulting	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 001	Transaction ID : SB17.4501
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) B. ZIP Mailing Services, Inc.		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 6304 Sheriff Road, Suite Z		Amount of Each Disbursement this Period 1145.97
City Landover	State MD	
Zip Code 20785-4361	Purpose of Disbursement Fundraising	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 003	Transaction ID : SB17.5691
Office Sought: <input checked="" 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: NY	District: 18	

Full Name (Last, First, Middle Initial) c. ZIP Mailing Services, Inc.		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 6304 Sheriff Road, Suite Z		Amount of Each Disbursement this Period 244.33
City Landover	State MD	
Zip Code 20785-4361	Purpose of Disbursement Fundraising	<input type="checkbox"/> Memo Item
Candidate Name Sakima for Congress	Category/Type 003	Transaction ID : SB17.5692
Office Sought: <input checked="" 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: NY	District: 18	

SUBTOTAL of Disbursements This Page (optional).....	2390.30
TOTAL This Period (last page this line number only).....	34628.48

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Sakima for Congress

Transaction ID : **SC/10.4189**

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Sakima Brown

Election: 2016

Primary
 General
 Other (specify) ▼

Mailing Address
43 South Clinton Street

City State ZIP Code
Poughkeepsie NY 12601

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 17 / Y 2015	M / D / Y 12/31/2099	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="1000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="1000.00"/>

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sakima Brown	Nature of Debt (Purpose): Advance for Advertising
Mailing Address 43 South Clinton Street	
City State Zip Code Poughkeepsie NY 12601	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5274	
Amount Incurred This Period 154.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 154.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct, Inc.	Nature of Debt (Purpose): Fundraising
Mailing Address 1420 Spring Hill Road #490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5696	
Amount Incurred This Period 314.63	Payment This Period 0.00	Outstanding Balance at Close of This Period 314.63

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct, Inc.	Nature of Debt (Purpose): Fundraising
Mailing Address 1420 Spring Hill Road #490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5699	
Amount Incurred This Period 20000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

1) SUBTOTALS This Period This Page (optional)	20469.25
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct, Inc.	Nature of Debt (Purpose): Fundraising
Mailing Address 1420 Spring Hill Road #490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5697	
Amount Incurred This Period 1506.38	Payment This Period 0.00	Outstanding Balance at Close of This Period 1506.38

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct, Inc.	Nature of Debt (Purpose): Fundraising
Mailing Address 1420 Spring Hill Road #490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5698	
Amount Incurred This Period 2220.83	Payment This Period 0.00	Outstanding Balance at Close of This Period 2220.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree Group, Inc.	Nature of Debt (Purpose): Printing
Mailing Address 8000 Villa Park Drive	
City State Zip Code Richmond VA 23228	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5700	
Amount Incurred This Period 1162.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1162.00

1) SUBTOTALS This Period This Page (optional)	4889.21
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Colortree Group, Inc.		Nature of Debt (Purpose): Printing
Mailing Address 8000 Villa Park Drive		
City State Zip Code Richmond VA 23228		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5701	
Amount Incurred This Period 1315.55	Payment This Period 0.00	Outstanding Balance at Close of This Period 1315.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct		Nature of Debt (Purpose): Printing
Mailing Address 4600A Boston Way		
City State Zip Code Lanham MD 20706		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5702	
Amount Incurred This Period 105.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 105.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct		Nature of Debt (Purpose): Printing
Mailing Address 4600A Boston Way		
City State Zip Code Lanham MD 20706		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5703	
Amount Incurred This Period 1987.85	Payment This Period 0.00	Outstanding Balance at Close of This Period 1987.85

1) SUBTOTALS This Period This Page (optional)	▶	3408.40
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct		Nature of Debt (Purpose): Printing
Mailing Address 4600A Boston Way		
City	State	Zip Code
Lanham	MD	20706

Outstanding Balance Beginning This Period	Transaction ID : SD10.5704	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2971.40"/>	<input type="text" value="0.00"/>	<input type="text" value="2971.40"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct		Nature of Debt (Purpose): Printing
Mailing Address 4600A Boston Way		
City	State	Zip Code
Lanham	MD	20706

Outstanding Balance Beginning This Period	Transaction ID : SD10.5705	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1630.95"/>	<input type="text" value="0.00"/>	<input type="text" value="1630.95"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP Direct		Nature of Debt (Purpose): Printing
Mailing Address 4600A Boston Way		
City	State	Zip Code
Lanham	MD	20706

Outstanding Balance Beginning This Period	Transaction ID : SD10.5706	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1274.05"/>	<input type="text" value="0.00"/>	<input type="text" value="1274.05"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5876.40"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5708**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
50.00 0.00 50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5709**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
50.00 0.00 50.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5710**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
50.00 0.00 50.00

1) SUBTOTALS This Period This Page (optional)	▶	150.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Nature of Debt (Purpose):
Direct Mail Services

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.5711

Amount Incurred This Period
50.00

Payment This Period
0.00

Outstanding Balance at Close of This Period
50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Nature of Debt (Purpose):
Direct Mail Services

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.5707

Amount Incurred This Period
50.00

Payment This Period
0.00

Outstanding Balance at Close of This Period
50.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Nature of Debt (Purpose):
Direct Mail Services

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Outstanding Balance Beginning This Period
0.00

Transaction ID : SD10.5712

Amount Incurred This Period
1298.65

Payment This Period
0.00

Outstanding Balance at Close of This Period
1298.65

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

1398.65

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
 McLean VA 22102

Nature of Debt (Purpose):
 Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5713**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
 McLean VA 22102

Nature of Debt (Purpose):
 Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5714**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
 McLean VA 22102

Nature of Debt (Purpose):
 Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5715**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="150.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5716**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
50.00 0.00 50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ECG Data Center

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
Direct Mail Services

Outstanding Balance Beginning This Period **Transaction ID : SD10.5717**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
50.00 0.00 50.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Omega List Company

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
List acquisition

Outstanding Balance Beginning This Period **Transaction ID : SD10.5719**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
710.00 0.00 710.00

1) SUBTOTALS This Period This Page (optional)	▶	810.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Omega List Company

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
List Acquisition

Outstanding Balance Beginning This Period **Transaction ID : SD10.5721**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
820.00 0.00 820.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Omega List Company

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
List acquisition

Outstanding Balance Beginning This Period **Transaction ID : SD10.5722**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
710.00 0.00 710.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Omega List Company

Mailing Address 1420 Spring Hill Road, Suite 490

City State Zip Code
McLean VA 22102

Nature of Debt (Purpose):
List acquisition

Outstanding Balance Beginning This Period **Transaction ID : SD10.5728**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
510.00 0.00 510.00

1) SUBTOTALS This Period This Page (optional)	▶	2040.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 53
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City State Zip Code McLean VA 22102		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5718	
Amount Incurred This Period 1241.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 1241.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City State Zip Code McLean VA 22102		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5723	
Amount Incurred This Period 51.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 51.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City State Zip Code McLean VA 22102		

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5724	
Amount Incurred This Period 725.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 725.00

1) SUBTOTALS This Period This Page (optional)	2018.26
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>	Transaction ID : SD10.5725
Amount Incurred This Period <input style="width:100%; text-align: right;" type="text" value="352.13"/>	Payment This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%; text-align: right;" type="text" value="352.13"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>	Transaction ID : SD10.5726
Amount Incurred This Period <input style="width:100%; text-align: right;" type="text" value="64.01"/>	Payment This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%; text-align: right;" type="text" value="64.01"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>	Transaction ID : SD10.5727
Amount Incurred This Period <input style="width:100%; text-align: right;" type="text" value="650.00"/>	Payment This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%; text-align: right;" type="text" value="650.00"/>	

1) SUBTOTALS This Period This Page (optional) ▶	<input style="width:100%; text-align: right;" type="text" value="1066.14"/>
2) TOTALS This Period (last page this line number only) ▶	<input style="width:100%; text-align: right;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input style="width:100%; text-align: right;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%; text-align: right;" type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 49 OF 53
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5729	
Amount Incurred This Period 179.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 179.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5730	
Amount Incurred This Period 316.54	Payment This Period 0.00	Outstanding Balance at Close of This Period 316.54

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5731	
Amount Incurred This Period 111.41	Payment This Period 0.00	Outstanding Balance at Close of This Period 111.41

1) SUBTOTALS This Period This Page (optional)	607.04
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5732	
Amount Incurred This Period 423.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 423.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5733	
Amount Incurred This Period 136.30	Payment This Period 0.00	Outstanding Balance at Close of This Period 136.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5734	
Amount Incurred This Period 140.39	Payment This Period 0.00	Outstanding Balance at Close of This Period 140.39

1) SUBTOTALS This Period This Page (optional)	699.77
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City	State	Zip Code
McLean	VA	22102

Outstanding Balance Beginning This Period	Transaction ID : SD10.5735	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="164.78"/>	<input type="text" value="0.00"/>	<input type="text" value="164.78"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City	State	Zip Code
McLean	VA	22102

Outstanding Balance Beginning This Period	Transaction ID : SD10.5736	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10.97"/>	<input type="text" value="0.00"/>	<input type="text" value="10.97"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company		Nature of Debt (Purpose): List acquisition
Mailing Address 1420 Spring Hill Road, Suite 490		
City	State	Zip Code
McLean	VA	22102

Outstanding Balance Beginning This Period	Transaction ID : SD10.5720	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="750.00"/>	<input type="text" value="0.00"/>	<input type="text" value="750.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="925.75"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
James Walsh

Mailing Address 20 Church Avenue

City State Zip Code
Ballston Spa NY 12020

Nature of Debt (Purpose):
Legal Service

Outstanding Balance Beginning This Period **Transaction ID : SD10.5443**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1000.00 0.00 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City State Zip Code
Chantilly VA 20151

Nature of Debt (Purpose):
Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10.5737**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
159.84 0.00 159.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City State Zip Code
Chantilly VA 20151

Nature of Debt (Purpose):
Fundraising

Outstanding Balance Beginning This Period **Transaction ID : SD10.5738**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
601.78 0.00 601.78

1) SUBTOTALS This Period This Page (optional)	▶	1761.62
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶		

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Sakima for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP Mailing Services, Inc.		Nature of Debt (Purpose): Fundraising
Mailing Address 6304 Sheriff Road, Suite Z		
City State Landover MD	Zip Code 20785-4361	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5740	
Amount Incurred This Period 222.34	Payment This Period 0.00	Outstanding Balance at Close of This Period 222.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	222.34
2) TOTALS This Period (last page this line number only)	46492.83
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	1000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	47492.83