

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
Kathleen Rice for Congress

ADDRESS (number and street) PO Box 744
 Check if different than previously reported. (ACC) Mineola NY 11501

2. **FEC IDENTIFICATION NUMBER** ▼ C C00555813 3. IS THIS REPORT NEW (N) **OR** AMENDED (A) NY 04

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)

(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 10 / 01 / 2015 through M M / D D / Y Y Y Y 12 / 31 / 2015

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 Margaret May

Signature of Treasurer Margaret May *[Electronically Filed]* Date M M / D D / Y Y Y Y 01 / 31 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Kathleen Rice 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))....	280597.74	1298986.95
(b) Total Contribution Refunds (from Line 20(d))	10.00	8185.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	280587.74	1290801.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	126652.17	836381.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	2325.96	25995.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	124326.21	810386.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	674143.69	
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).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Kathleen Rice 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).....	211305.00	918323.63
(ii) Unitemized.....	8938.47	28250.08
(iii) TOTAL of contributions from individuals ▶	220243.47	946573.71
(b) Political Party Committees.....	14.27	22.93
(c) Other Political Committees (such as PACs).....	60340.00	352390.31
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	280597.74	1298986.95
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	25232.07	91625.69
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	2325.96	25995.15
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.64	1.04
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	308156.41	1416608.83

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	126652.17	836381.62
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	10.00	3185.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10.00	8185.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	126662.17	844566.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	492649.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	308156.41
25. SUBTOTAL (add Line 23 and Line 24).....	800805.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	126662.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	674143.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Debbie Alpert

Mailing Address 455 Mistletoe Way

City Lawrence State NY Zip Code 11559-2716

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

Name of Employer N/A Occupation Homemaker

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
 10 / 26 / 2015

Transaction ID : VNW3EE2NED7

Amount of Each Receipt this Period
2700.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City Englewood Cliffs State NJ Zip Code 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NED7E

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Malkie Alpert

Mailing Address 136 Woodmere Blvd S

City Woodmere State NY Zip Code 11598-1822

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

Name of Employer N/A 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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEG1

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NEG1E

Amount of Each Receipt this Period
 _____ **500.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Candace Anderson

Mailing Address **12151 Fairfax Station Rd**

City **Fairfax Station** State **VA** Zip Code **22039-1212**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : VNW3EE1G7T5

Amount of Each Receipt this Period
 _____ **250.00**

C. Full Name (Last, First, Middle Initial)
Candace Anderson

Mailing Address **12151 Fairfax Station Rd**

City **Fairfax Station** State **VA** Zip Code **22039-1212**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : VNW3EE1G7W1

Amount of Each Receipt this Period
 _____ **500.00**

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

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

_____ **750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Rao S. Anumolu

Mailing Address 38 Vanderbilt Pkwy

City State Zip Code
Dix Hills NY 11746-5816

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

Name of Employer Occupation
ASR Management & Technical Service President/CEO

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
12 / 08 / 2015

Transaction ID : VNW3EE3DQB9

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Emil Assentato

Mailing Address 141 Piping Rock Rd

City State Zip Code
Locust Valley NY 11560-2508

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

Name of Employer Occupation
Tradition North America Manager

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
11 / 18 / 2015

Transaction ID : VNW3EE2VK52

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Donald Auerbach

Mailing Address 1365 Independence Ct., SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation
Investment Company Institute Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2015

Transaction ID : VNW3EE1RJ14

Amount of Each Receipt this Period
500.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence J. Aylward

Mailing Address P.O. BOX

City State Zip Code
Oyster Bay NY 11771

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

Name of Employer Occupation
N/A Not Employed

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
 11 / 30 / 2015

Transaction ID : VNW3EE35XM0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kambiz Babaoff

Mailing Address 925 N Alpine Dr

City State Zip Code
Beverly Hills CA 90210-2946

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

Name of Employer Occupation
Ensemble Hotel Partners Hotel Developer

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
 11 / 13 / 2015

Transaction ID : VNW3EE2P7X8

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Bob Baravarian

Mailing Address 151 Esparta Way

City State Zip Code
Santa Monica CA 90402-2138

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

Name of Employer Occupation
Univ Foot and Ankle Podiatric Surgeon

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
 11 / 16 / 2015

Transaction ID : VNW3EE2T969

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 9 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Mike Bardi

Mailing Address 1110 N Brand Blvd

City State Zip Code
Glendale CA 91202-2567

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

Name of Employer Occupation
Endodontist FM Bardi

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
 11 / 16 / 2015

Transaction ID : VNW3EE2T977

Amount of Each Receipt this Period
500.00

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

Mailing Address 219 9th St NE

City State Zip Code
Washington DC 20002-6109

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

Name of Employer Occupation
Avenue Solutions Lobbyist

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
 10 / 30 / 2015

Transaction ID : VNW3EE262D2

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jay Bernstein

Mailing Address 124 I U Willets Rd
26 Pheasant Run

City State Zip Code
Old Westbury NY 11568-1521

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

Name of Employer Occupation
N.I.C. Holding Corp. Business

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
 12 / 01 / 2015

Transaction ID : VNW3EE37PC9

Amount of Each Receipt this Period
2700.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
J. Nicole Bivens Collinson

Mailing Address 229 N Galveston St

City State Zip Code
Arlington VA 22203-1313

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

Name of Employer Occupation
Sandler, Travis & Rosenberg, PA President, Trade and Legislative Affai

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
10 / 22 / 2015

Transaction ID : VNW3EE1XVG9

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City State Zip Code
Washington DC 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : VNW3EE1XVG9E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
April Boyd

Mailing Address 127 6th St SE

City State Zip Code
Washington DC 20003-1129

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

Name of Employer Occupation
Yahoo Senior Director, Federal Government Af

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
12 / 01 / 2015

Transaction ID : VNW3EE3F2X2

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 10 / 2015

Transaction ID : VNW3EE3F2X2E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Benjamin Brafman

Mailing Address 767 3rd Ave
FI 26

City New York State NY Zip Code 10017-9002

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

Name of Employer Occupation
Brafman & Associates, P.C. Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2CCR0

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Bert E. Brodsky

Mailing Address 26 Harbor Park Dr

City Port Washington State NY Zip Code 11050-4602

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

Name of Employer Occupation
Sandata Technologies Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2015

Transaction ID : VNW3EE37TC8

Amount of Each Receipt this Period
250.00

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

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

2950.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 160

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Bert E. Brodsky

Mailing Address 26 Harbor Park Dr

City State Zip Code
 Port Washington NY 11050-4602

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

Name of Employer Occupation
 Sandata Technologies Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : VNW3EE39Q85

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
Cynthia Brown

Mailing Address 5035 Garfield St NW

City State Zip Code
 Washington DC 20016-3465

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

Name of Employer Occupation
 West Front Strategies lobbyist

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
 12 / 01 / 2015

Transaction ID : VNW3EE37RA7

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Alan Craig Bushell

Mailing Address 20 Round Hill Ln

City State Zip Code
 Port Washington NY 11050-1124

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

Name of Employer Occupation
 ProCalc, Inc. Owner

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
 10 / 13 / 2015

Transaction ID : VNW3EE1FZ29

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 160
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. David Cassaro		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 24 / 2015
Mailing Address 87 5th St		Transaction ID : VNW3EE32VY0
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dave Cassaro consulting llc	Occupation Consultant	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) B. Robert B Catell		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 62 Osborne Rd		Transaction ID : VNW3EE467X5
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) C. C. Stuart Chapman		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 3909 Albemarle St NW		Transaction ID : VNW3EE465M1
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer American Continental Group	Occupation Partner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	3700.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 160
(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)
Kathleen Rice for Congress

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

Mailing Address 8 Rickland Dr

City Caldwell State NJ Zip Code 07006-4184

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

Name of Employer Food Distribution Occupation Richland Orchards

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2015

Transaction ID : VNW3EE3KJ00

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Milton Cooper

Mailing Address 3333 New Hyde Park Rd

City New Hyde Park State NY Zip Code 11042-1204

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

Name of Employer Kimco Realty Corporation Occupation Founder

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VNW3EE3JSJ8

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Ben Cooperberg

Mailing Address 1243 Grenox Rd

City Wynnewood State PA Zip Code 19096-2218

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

Name of Employer Pennsylvania Hospital Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2AQC2

Amount of Each Receipt this Period
 2700.00

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

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

6200.00

**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 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Ben Cooperberg

Mailing Address 1243 Grenox Rd

City Wynnewood State PA Zip Code 19096-2218

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

Name of Employer Pennsylvania Hospital Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2B337

Amount of Each Receipt this Period
2300.00

B. Full Name (Last, First, Middle Initial)
Jordana Cooperberg

Mailing Address 1243 Grenox Rd

City Wynnewood State PA Zip Code 19096-2218

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2AQB4

Amount of Each Receipt this Period
2300.00

C. Full Name (Last, First, Middle Initial)
Jordana Cooperberg

Mailing Address 1243 Grenox Rd

City Wynnewood State PA Zip Code 19096-2218

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2B311

Amount of Each Receipt this Period
2700.00

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

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

7300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
George Daneshgar

Mailing Address 1027 N Roxbury Dr

City Beverly Hills State CA Zip Code 90210-3021

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

Name of Employer Self Occupation Real Estate Investor

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 : VNW3EE2P7V2

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Siamak Dardashty

Mailing Address 10600 Lindbrook Dr

City Los Angeles State CA Zip Code 90024-3232

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

Name of Employer royalpaper Occupation Businessman

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 / 16 / 2015

Transaction ID : VNW3EE2T928

Amount of Each Receipt this Period
 260.00

C. Full Name (Last, First, Middle Initial)
Aryeh Davis

Mailing Address 4 Copperbeech Ln

City Lawrence State NY Zip Code 11559-2606

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

Name of Employer Pequot Capital Management Occupation General Counsel

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE2NEB2

Amount of Each Receipt this Period
 500.00

* Earmarked Contribution: See Below

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

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

1260.00

**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 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt **11 / 03 / 2015**

Transaction ID : VNW3EE2NEB2E

Amount of Each Receipt this Period **500.00**

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Talia Day

Mailing Address **160 W 86th St
Apt 4BC**

City **New York** State **NY** Zip Code **10024-4018**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5000.00**

Date of Receipt **11 / 02 / 2015**

Transaction ID : VNW3EE2A998

Amount of Each Receipt this Period **2700.00**

C. Full Name (Last, First, Middle Initial)
Talia Day

Mailing Address **160 W 86th St
Apt 4BC**

City **New York** State **NY** Zip Code **10024-4018**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5000.00**

Date of Receipt **11 / 02 / 2015**

Transaction ID : VNW3EE2B360

Amount of Each Receipt this Period **2300.00**

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

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

5000.00

**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 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Peter Dejana

Mailing Address 30 Sagamore Hill Dr
30 Sagamore Hill Drive

City Port Washington State NY Zip Code 11050-2110

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

Name of Employer Dejana Industries, Inc. Occupation Executive

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
12 / 02 / 2015

Transaction ID : VNW3EE38YG4

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Lori Denham

Mailing Address 5714 MacArthur Blvd NW

City Washington State DC Zip Code 20016-5303

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

Name of Employer Kountoupes Denham Occupation Lobbyist

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
12 / 21 / 2015

Transaction ID : VNW3EE3P521

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ivan Deutsch

Mailing Address 32 N Wood Ln

City Woodmere State NY Zip Code 11598-2122

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

Name of Employer Sullivan & Cromwell Occupation Partner

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
10 / 26 / 2015

Transaction ID : VNW3EE2NEH9

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NEH9E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

Mailing Address 1370 6th Ave
FI 25

City State Zip Code
New York NY 10019-4602

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

Name of Employer Occupation
Millbrook Capital Management President

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
12 / 02 / 2015

Transaction ID : VNW3EE38YH2

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
David L. Eisbrouch

Mailing Address 32 Winding Way

City State Zip Code
Woodcliff Lake NJ 07677-7930

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

Name of Employer Occupation
The Law Offices of Balkin & Eisbrouch, Partner

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
10 / 30 / 2015

Transaction ID : VNW3EE25Y28

Amount of Each Receipt this Period
1000.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Leon Farahnik

Mailing Address 10250 Constellation Blvd
Ste 2820

City Los Angeles State CA Zip Code 90067-6244

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

Name of Employer CarbonLITE Occupation Renewable Material

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : VNW3EE2T8R9

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 16553 Park Lane Dr

City Los Angeles State CA Zip Code 90049-1148

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

Name of Employer Bordan Show Co. Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : VNW3EE2V0R2

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 25 Highview Dr

City Huntington State NY Zip Code 11743-1428

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

Name of Employer The D&F Development Group Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VNW3EE3JSK6

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Murray Forman

Mailing Address 291 Ocean Ave

City State Zip Code
Lawrence NY 11559-2010

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

Name of Employer Occupation
Self-Employed Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : VNW3EE2NET0

Amount of Each Receipt this Period
1500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NET0E

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Eric Fornell

Mailing Address 67 Dogwood Lane

City State Zip Code
Locust Valley NY 11560

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

Name of Employer Occupation
Wells Fargo Securities Vice Chairman of Investment Banking

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 01 / 2015

Transaction ID : VNW3EE37K23

Amount of Each Receipt this Period
2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Stephanie Fornell

Mailing Address 67 Dogwood Ln

City Locust Valley	State NY	Zip Code 11560-2315
-----------------------	-------------	------------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		01		2015

Transaction ID : VNW3EE37QK7

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
James A French

Mailing Address 7508 Glendale Rd

City Chevy Chase	State MD	Zip Code 20815-4912
---------------------	-------------	------------------------

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

Name of Employer Thorsen French Advocacy	Occupation Founder and Principal
---	-------------------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2015

Transaction ID : VNW3EE1XVP7

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City Washington	State DC	Zip Code 20003-1121
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2015

Transaction ID : VNW3EE1XVP7E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

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 23 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Claudia Galvin

Mailing Address 365 Stewart Ave
Apt C21

City Garden City State NY Zip Code 11530-4532

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

Name of Employer Daniel Gale Sotheby's Realty Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : VNW3EE3F0E0

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2015

Transaction ID : VNW3EE3F0E0E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Claudia Galvin

Mailing Address 365 Stewart Ave
Apt C21

City Garden City State NY Zip Code 11530-4532

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

Name of Employer Daniel Gale Sotheby's Realty Occupation Sales

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2015

Transaction ID : VNW3EE3R6E4

Amount of Each Receipt this Period
5.00

* Earmarked Contribution: See Below

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

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

30.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 160
	<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)
Kathleen Rice for Congress

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4599.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2015
Transaction ID : VNW3EE3R6E4E
 Amount of Each Receipt this Period
 5.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Christopher Lorenzo Gaston
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 Hesketh St
 City Chevy Chase State MD Zip Code 20815-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Senior Policy Director
 Davis & Harman LLP
 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
 10 / 22 / 2015
Transaction ID : VNW3EE1XVQ4
 Amount of Each Receipt this Period
 500.00
 * Earmarked Contribution: See Below

C. New Democratic Coalition PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 Pennsylvania Ave SE
 FI 2
 City Washington State DC Zip Code 20003-1121
 FEC ID number of contributing federal political committee. **C** C00409730
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015
Transaction ID : VNW3EE1XVQ4E
 Amount of Each Receipt this Period
 500.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

500.00

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

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

FOR LINE NUMBER: PAGE 25 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Jay Gellert

Mailing Address 21650 Oxnard St

City State Zip Code
Woodland Hills CA 91367-4901

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

Name of Employer Occupation
Health Net Inc CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : VNW3EE2VZH2

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Baruch Glaubach

Mailing Address 150 Albro Ln

City State Zip Code
Lawrence NY 11569-2801

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

Name of Employer Occupation
Self-Employed Trader

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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEF3

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NEF3E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Jessica B Gordon

Mailing Address 43 Ruth Dr

City	State	Zip Code
New City	NY	10956-3938

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

Name of Employer	Occupation
Weill Cornell Hospital	Assistant Attending Physician

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
 12 / 08 / 2015

Transaction ID : VNW3EE3DQC7

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Greenfield

Mailing Address 112 Merrick Rd

City	State	Zip Code
Lynbrook	NY	11563-2739

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

Name of Employer	Occupation
NGL Group LLC	Insurance

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
 12 / 01 / 2015

Transaction ID : VNW3EE37P87

Amount of Each Receipt this Period
250.00

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

Mailing Address 910 Constitution Ave NE

City	State	Zip Code
Washington	DC	20002-6202

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

Name of Employer	Occupation
Forbes Tate Partners	Consultant

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
 12 / 31 / 2015

Transaction ID : VNW3EE3TCA2

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
JAMES HADDAD

Mailing Address 7701 Woodmont Ave
Apt 1008

City State Zip Code
Bethesda MD 20814-6044

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

Name of Employer Occupation
Law Office of James M Haddad Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4BKC5

Amount of Each Receipt this Period
15.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City State Zip Code
West Somerville MA 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4BKC5E

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
George Haggerty

Mailing Address 500 N Broadway
Ste 128

City State Zip Code
Jericho NY 11753-2130

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

Name of Employer Occupation
George Haggerty and Associates P.C. Attorney

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
10 / 26 / 2015

Transaction ID : VNW3EE1XW97

Amount of Each Receipt this Period
2700.00

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

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

2715.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Kambiz Hakim

Mailing Address 1541 Ocean Ave
Ste 200

City Santa Monica State CA Zip Code 90401-2104

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

Name of Employer Kamway Sporting Goods Occupation President

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
 11 / 17 / 2015

Transaction ID : VNW3EE2V0V5

Amount of Each Receipt this Period
1000.00

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

Mailing Address 7750 Gloria Ave

City Van Nuys State CA Zip Code 91406-1819

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

Name of Employer Cybernet Communications Occupation President

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
 11 / 16 / 2015

Transaction ID : VNW3EE2T9A1

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Stephen L. Hammerman

Mailing Address 1806 Bay Blvd

City Atlantic Beach State NY Zip Code 11509-1401

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

Name of Employer N/A Occupation 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 Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE467W7

Amount of Each Receipt this Period
1700.00

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 29 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Mary Ellen Hanson

Mailing Address 701 Ridgecrest Dr SE

City	State	Zip Code
Albuquerque	NM	87108-3366

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

Name of Employer	Occupation
N/A	Retired

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
 11 / 03 / 2015

Transaction ID : VNW3EE2CCX8

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
Brett Heimov

Mailing Address 10203 Bieber Pl

City	State	Zip Code
Silver Spring	MD	20901-2613

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

Name of Employer	Occupation
Envision Strategy	Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2015

Transaction ID : VNW3EE3MY45

Amount of Each Receipt this Period
 _____ 500.00

C. Full Name (Last, First, Middle Initial)
Alan Hirmes

Mailing Address 25 Wood Lance

City	State	Zip Code
Woodsburgh	NY	11598

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

Name of Employer	Occupation
N/A	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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEJ7

Amount of Each Receipt this Period
 _____ 500.00

* Earmarked Contribution: See Below

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 30 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
11650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2015

Transaction ID : VNW3EE2NEJ7E

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Carol Hoffman

Mailing Address **1352 Ridge Rd**
The Barn House Suite

City **Syosset** State **NY** Zip Code **11791-9632**

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

Name of Employer _____ Occupation _____
Self-Employed **Arbitrator/Mediator**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2015

Transaction ID : VNW3EE2DG14

Amount of Each Receipt this Period

500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
4599.21

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2015

Transaction ID : VNW3EE2DG14E

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Leo Jardot

Mailing Address 6316 Old Chesterbrook Rd

City State Zip Code
McLean VA 22101-4712

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

Name of Employer Occupation
Alignment Government Strategies Partner

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
10 / 22 / 2015

Transaction ID : VNW3EE1XVR2

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City State Zip Code
Washington DC 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : VNW3EE1XVR2E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Brian Jedwab

Mailing Address 25 Bayberry Rd

City State Zip Code
Lawrence NY 11559-2723

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

Name of Employer Occupation
N/A 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
11 / 06 / 2015

Transaction ID : VNW3EE2PRV7

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt **11 / 09 / 2015**

Transaction ID : VNW3EE2PRV7E

Amount of Each Receipt this Period **500.00**

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Valdimir Jelisavcic

Mailing Address **516 E 78th St
Apt 1J**

City **New York** State **NY** Zip Code **10075-1113**

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

Name of Employer **Bowery IM** Occupation **Finance**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2500.00**

Date of Receipt **12 / 11 / 2015**

Transaction ID : VNW3EE3F339

Amount of Each Receipt this Period **2500.00**

C. Full Name (Last, First, Middle Initial)
William D. Jelley

Mailing Address **6318 75th St**

City **Middle Village** State **NY** Zip Code **11379-1818**

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

Name of Employer **Self-Employed** Occupation **Interior Designer**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **2227.63**

Date of Receipt **12 / 08 / 2015**

Transaction ID : VNW3EE3DQD5

Amount of Each Receipt this Period **1000.00**

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Neil Kadisha

Mailing Address 9420 Wilshire Blvd
Ste 400

City State Zip Code
Beverly Hills CA 90212-3151

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

Name of Employer Occupation
Omninet Capital Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : VNW3EE2V0X1

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mark Karlan

Mailing Address 600 Alma Real Dr

City State Zip Code
Pacific Palisades CA 90272-4421

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

Name of Employer Occupation
UCLA Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : VNW3EE2T8S6

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lynore Keating

Mailing Address 8 Monroe St

City State Zip Code
Garden City NY 11530-4032

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

Name of Employer Occupation
Christ Lutheran church Administrative assistant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : VNW3EE38QZ8

Amount of Each Receipt this Period
 250.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 34 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Thomas J. Killeen

Mailing Address 1320 Rxr Plz

City State Zip Code
Uniondale NY 11556-1320

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

Name of Employer Occupation
Farrell Fritz, P.C. Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 / 2015

Transaction ID : VNW3EE4APR8

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Benjamin Klein

Mailing Address 1401 Kenwood Ave

City State Zip Code
Alexandria VA 22302-2315

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

Name of Employer Occupation
Heather Podesta + Partners Government Relations

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
 12 04 / 2015

Transaction ID : VNW3EE3A2V9

Amount of Each Receipt this Period
500.00

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

Mailing Address 565 Park Ave
FI 12W

City State Zip Code
New York NY 10065-7322

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

Name of Employer Occupation
News Corp. Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 20 / 2015

Transaction ID : VNW3EE2YWQ7

Amount of Each Receipt this Period
1000.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Chris Komisarjevsky

Mailing Address 1233 Beech St
Apt 29

City Atlantic Beach State NY Zip Code 11509-1630

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VNW3EE4BKD3

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE4BKD3E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Ira J Lamel

Mailing Address 60 South Rd

City Westhampton Beach State NY Zip Code 11978-2222

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

Name of Employer N/A Occupation 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 Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE3TDQ6

Amount of Each Receipt this Period
2700.00

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 36 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Joshua Lamel

Mailing Address 5510 Trent St

City State Zip Code
Chevy Chase MD 20815-5512

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

Name of Employer Occupation
BGR Group Attorney

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
12 / 31 / 2015

Transaction ID : VNW3EE4BKE1

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City State Zip Code
West Somerville MA 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4BKE1E

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Murray Lappe

Mailing Address 8639 Drake Ave

City State Zip Code
Skokie IL 60076-2309

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

Name of Employer Occupation
EScreen Private Equity

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
11 / 16 / 2015

Transaction ID : VNW3EE2T8T4

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Leonard A. Lauder

Mailing Address 767 5th Ave
FI 40

City State Zip Code
New York NY 10153-0003

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

Name of Employer Occupation
Estee Lauder Inc. Chairman Emeritus

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE46808

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Leonard A. Lauder

Mailing Address 767 5th Ave
FI 40

City State Zip Code
New York NY 10153-0003

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

Name of Employer Occupation
Estee Lauder Inc. Chairman Emeritus

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE46824

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
William P. Lauder

Mailing Address 767 5th Ave
FI 40

City State Zip Code
New York NY 10153-0003

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

Name of Employer Occupation
The Estee Lauder Companies, Inc. Executive Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4SDA9

Amount of Each Receipt this Period
2000.00

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

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

7400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Donald Leogrande

Mailing Address 80 Windsor Ave

City	State	Zip Code
Mineola	NY	11501-1922

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

Name of Employer	Occupation
Windsor Fuel Company	Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : VNW3EE3DQE3

Amount of Each Receipt this Period
 _____ 250.00

B. Full Name (Last, First, Middle Initial)
Donald Leogrande

Mailing Address 80 Windsor Ave

City	State	Zip Code
Mineola	NY	11501-1922

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

Name of Employer	Occupation
Windsor Fuel Company	Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : VNW3EE3PAC0

Amount of Each Receipt this Period
 _____ 1950.00

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

Mailing Address 2006 Columbia Rd NW
Apt 7

City	State	Zip Code
Washington	DC	20009-1320

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

Name of Employer	Occupation
Levick	Vice President, Government Relations

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
 10 / 22 / 2015

Transaction ID : VNW3EE1XVS0

Amount of Each Receipt this Period
 _____ 500.00

* Earmarked Contribution: See Below

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

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

_____ 2700.00

**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 39 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C C00409730**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2015

Transaction ID : VNW3EE1XVS0E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Myra Levy

Mailing Address 19 Wright Rd

City Rockville Centre State NY Zip Code 11570-1236

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

Name of Employer Occupation
N/A Retired

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
10 / 20 / 2015

Transaction ID : VNW3EE25XH3

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2015

Transaction ID : VNW3EE25XH3E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Myra Levy

Mailing Address 19 Wright Rd

City State Zip Code
Rockville Centre NY 11570-1236

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 20 / 2015

Transaction ID : VNW3EE36QR8

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City State Zip Code
West Somerville MA 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 22 / 2015

Transaction ID : VNW3EE36QR8E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Shaul Levy

Mailing Address 201 Wilshire Blvd
FI 2

City State Zip Code
Santa Monica CA 90401-1219

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

Name of Employer Occupation
Levy Affiliates Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : VNW3EE2T9F0

Amount of Each Receipt this Period
2000.00

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

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

2025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Allan Lieberman

Mailing Address 363 Edward Ave

City Woodmere State NY Zip Code 11598-2824

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

Name of Employer Meridian Capital Group, LLC Occupation Mortgage Broker

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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEP9

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City Englewood Cliffs State NJ Zip Code 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NEP9E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Marisa Anne Lizza

Mailing Address 42 Yellow Cote Rd

City Oyster Bay State NY Zip Code 11771-4111

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

Name of Employer Self-Employed Occupation Thoroughbred Horse Racing Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : VNW3EE38YJ0

Amount of Each Receipt this Period
2700.00

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

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

2950.00

**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 42 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Wendy Mackenzie

Mailing Address 829 Park Ave
Apt 8C

City State Zip Code
New York NY 10021-2839

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

Name of Employer Occupation
Self-Employed Public Affairs Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : VNW3EE38YK8

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Asher Mansdorf

Mailing Address 360 Central Ave

City State Zip Code
Lawrence NY 11559-1619

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : VNW3EE26NJ3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Asher Mansdorf

Mailing Address 360 Central Ave

City State Zip Code
Lawrence NY 11559-1619

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : VNW3EE38YX7

Amount of Each Receipt this Period
300.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Asher Mansdorf

Mailing Address 360 Central Ave

City State Zip Code
Lawrence NY 11559-1619

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : VNW3EE38YY5

Amount of Each Receipt this Period
700.00

B. Full Name (Last, First, Middle Initial)
James G Marsh

Mailing Address 55 Chestnut St

City State Zip Code
Garden City NY 11530-6334

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

Name of Employer Occupation
O'Reilly, Marsh & Corteselli P.C. Partner and Attorney

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
 10 / 26 / 2015

Transaction ID : VNW3EE1Z9X1

Amount of Each Receipt this Period
300.00

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

Mailing Address 10 Lotus St

City State Zip Code
Cedarhurst NY 11516-2615

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

Name of Employer Occupation
Wolf Maryles & Associates 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
 11 / 02 / 2015

Transaction ID : VNW3EE2NEC0

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

1250.00

**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 44 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NEC0E

Amount of Each Receipt this Period
 _____ **250.00**

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Rosanne B. McAward

Mailing Address **100 Banks Ave
Apt 1202**

City **Rockville Centre** State **NY** Zip Code **11570-6205**

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

Name of Employer _____ Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 24 / 2015

Transaction ID : VNW3EE32PA2

Amount of Each Receipt this Period
 _____ **250.00**

C. Full Name (Last, First, Middle Initial)
Cynthia McMullen

Mailing Address **153 Cedar Rd**

City **Mullica Hill** State **NJ** Zip Code **08062-2501**

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

Name of Employer **COPS Monitoring** Occupation **Auditor**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : VNW3EE2AKP3

Amount of Each Receipt this Period
 _____ **2500.00**

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

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

_____ **2750.00**

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

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

FOR LINE NUMBER: PAGE 45 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Cynthia McMullen

Mailing Address 153 Cedar Rd

City Mullica Hill State NJ Zip Code 08062-2501

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

Name of Employer COPS Monitoring Occupation Auditor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 02 / 2015

Transaction ID : VNW3EE2B2S8

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James McMullen

Mailing Address 153 Cedar Rd

City Mullica Hill State NJ Zip Code 08062-2501

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

Name of Employer COPS Monitoring Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 02 / 2015

Transaction ID : VNW3EE2AKJ1

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
James McMullen

Mailing Address 153 Cedar Rd

City Mullica Hill State NJ Zip Code 08062-2501

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

Name of Employer COPS Monitoring Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
11 / 02 / 2015

Transaction ID : VNW3EE2B2N6

Amount of Each Receipt this Period
100.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Stuart Mehl

Mailing Address 186 Hollywood Xing

City State Zip Code
Lawrence NY 11559-2710

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

Name of Employer Occupation
Mehlco Financial Group CEO

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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEN1

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NEN1E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Michael Meyer

Mailing Address 4 Legare St

City State Zip Code
Charleston SC 29401-2336

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

Name of Employer Occupation
SeaportGlobal Executive

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
 11 / 19 / 2015

Transaction ID : VNW3EE2YQW7

Amount of Each Receipt this Period
2700.00

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

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

2950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Bijan Nahai

Mailing Address 487 St Pierre Rd

City Los Angeles State CA Zip Code 90077-3409

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

Name of Employer Nahai Insurance Occupation Insurance

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
 11 / 16 / 2015

Transaction ID : VNW3EE2T8W0

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Erin C.H. Neal

Mailing Address 507 N Lincoln St

City Arlington State VA Zip Code 22201-1733

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

Name of Employer McBee Strategic Occupation Executive Vice President

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
 10 / 22 / 2015

Transaction ID : VNW3EE1XVT8

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1XVT8E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

1000.00

**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 48 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Erik Olson

Mailing Address 6424 33rd Street NW

City Washington State DC Zip Code 20015

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

Name of Employer Venn Strategies Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : VNW3EE1HTP1

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Antonino Piazza

Mailing Address 2382 National Dr

City Brooklyn State NY Zip Code 11234-6835

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

Name of Employer N/A Occupation Self-Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE3TA99

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Irving H. Picard

Mailing Address 1 Christie Pl
Unit 401E

City Scarsdale State NY Zip Code 10583-8308

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

Name of Employer Baker & Hostetler LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1ZA60

Amount of Each Receipt this Period
 250.00

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

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

3450.00

**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 49 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Brian A Pomper

Mailing Address 730 Ridge Dr

City State Zip Code
McLean VA 22101-1620

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

Name of Employer Occupation
Akin Gump Strauss Hauer & Feld LLP Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2CD02

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City State Zip Code
Washington DC 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2CD02E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Samuel Porat

Mailing Address 1014 Greacen Point Rd

City State Zip Code
Mamaroneck NY 10543-4609

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

Name of Employer Occupation
Neuberger Berman Finance

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VNW3EE3F321

Amount of Each Receipt this Period
2500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Frank Pournazarian

Mailing Address 257 Ashdale Pl

City Los Angeles State CA Zip Code 90049-2432

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

Name of Employer parkford properties Occupation Businessman

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 / 16 / 2015

Transaction ID : VNW3EE2T935

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Timothy Powderly

Mailing Address 3411 3rd St N

City Arlington State VA Zip Code 22201-1713

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

Name of Employer Apple Occupation Director, Federal Government Affairs

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 / 21 / 2015

Transaction ID : VNW3EE3QQM9

Amount of Each Receipt this Period
 500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
 FI 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation Conduit total listed in Agg. field

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 / 23 / 2015

Transaction ID : VNW3EE3QQM9E

Amount of Each Receipt this Period
 500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Irene Rabinor

Mailing Address 8 Kensington St

City Lido Beach State NY Zip Code 11561-5104

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

Name of Employer N/A 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
 11 / 01 / 2015

Transaction ID : VNW3EE2B0P0

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Irene Rabinor

Mailing Address 8 Kensington St

City Lido Beach State NY Zip Code 11561-5104

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

Name of Employer N/A Occupation Retired

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
 12 / 01 / 2015

Transaction ID : VNW3EE38E95

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Kathryn Rafferty

Mailing Address 64 2nd St

City Garden City State NY Zip Code 11530-4323

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : VNW3EE38M07

Amount of Each Receipt this Period
2700.00

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

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

2800.00

**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 52 OF 160
	<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)
Kathleen Rice for Congress

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

Mailing Address 64 2nd St

City State Zip Code
Garden City NY 11530-4323

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

Name of Employer Occupation
Rafferty Holdings LLC CEO

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
12 / 02 / 2015

Transaction ID : VNW3EE38KX5

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Lewis S. Ranieri

Mailing Address 50 Charles Lindbergh Blvd
Ste 500

City State Zip Code
Uniondale NY 11553-3650

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

Name of Employer Occupation
Ranieri Partners Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4SDK0

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Lewis S. Ranieri

Mailing Address 50 Charles Lindbergh Blvd
Ste 500

City State Zip Code
Uniondale NY 11553-3650

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

Name of Employer Occupation
Ranieri Partners Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4SDM8

Amount of Each Receipt this Period
2700.00

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 53 OF 160
(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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Chris Read

Mailing Address 117 Pine St

City State Zip Code
Garden City NY 11530-6618

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

Name of Employer Occupation
Amato Law Group Attorney

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 / 30 / 2015

Transaction ID : VNW3EE3SM42

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
Deborah L. Rechler

Mailing Address 58 Hoaglands Ln

City State Zip Code
Glen Head NY 11545-2008

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

Name of Employer Occupation
N/A Homemaker

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 / 21 / 2015

Transaction ID : VNW3EE3PVD5

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
Scott Rechler

Mailing Address 58 Hoaglands Ln

City State Zip Code
Glen Head NY 11545-2008

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

Name of Employer Occupation
RXR Realty LLC CEO

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 / 21 / 2015

Transaction ID : VNW3EE3PBS6

Amount of Each Receipt this Period
 2700.00

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

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

8100.00

**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 54 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Kevin P. Reilly Jr.

Mailing Address 5019 E Bluebell Dr

City Baton Rouge State LA Zip Code 70808-8618

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

Name of Employer Lamar Advertising Co. Occupation Chairman of the Board and President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE46832

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Kevin P. Reilly Jr.

Mailing Address 5019 E Bluebell Dr

City Baton Rouge State LA Zip Code 70808-8618

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

Name of Employer Lamar Advertising Co. Occupation Chairman of the Board and President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE46858

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Winifred Reilly

Mailing Address 509 E. Blue Bell Drive

City Baton Rouge State LA Zip Code 70808

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

Name of Employer Self-Employed Occupation Artist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE46816

Amount of Each Receipt this Period
2700.00

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

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

5600.00

**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 55 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Winifred Reilly

Mailing Address 509 E. Blue Bell Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Self-Employed Artist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : VNW3EE46840

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Phil J. Rosen

Mailing Address 431 Mistletoe Way

City State Zip Code
Lawrence NY 11559-2716

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 26 2015

Transaction ID : VNW3EE2NEM3

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 03 2015

Transaction ID : VNW3EE2NEM3E

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

1200.00

**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 56 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Andrew M Rosenberg

Mailing Address 2003 Glen Dr

City State Zip Code
Alexandria VA 22307-1138

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

Name of Employer Occupation
Thorn Run Partners Partner

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
12 / 07 / 2015

Transaction ID : VNW3EE3F2Z8

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City State Zip Code
Washington DC 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2015

Transaction ID : VNW3EE3F2Z8E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Jason Rosenstock

Mailing Address 9907 Harrogate Rd

City State Zip Code
Bethesda MD 20817-1542

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

Name of Employer Occupation
Thorn Run Partners Consultant

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
10 / 21 / 2015

Transaction ID : VNW3EE1SEQ6

Amount of Each Receipt this Period
500.00

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

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

1000.00

**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 57 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Gary Ross

Mailing Address 3 Park Ave

City State Zip Code
New York NY 10016-5902

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

Name of Employer Occupation
Pira Consulting

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2015

Transaction ID : VNW3EE3F313

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1633 New Hwy

City State Zip Code
Farmingdale NY 11735-1522

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

Name of Employer Occupation
Coastal Distribution, LLC Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : VNW3EE3E1T9

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Albert Salvatico

Mailing Address 127 Somerset Ave

City State Zip Code
Garden City NY 11530-1348

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

Name of Employer Occupation
Jaral Properties, Inc. Executive

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
11 / 11 / 2015

Transaction ID : VNW3EE2N7A9

Amount of Each Receipt this Period
2700.00

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

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

6200.00

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

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

FOR LINE NUMBER: PAGE 58 OF 160
(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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Anthony Scaramucci

Mailing Address 17 Parkwoods Rd

City State Zip Code
Manhasset NY 11030-1509

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

Name of Employer Occupation
Skybridge Capital CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE3S211

Amount of Each Receipt this Period
2700.00

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

Mailing Address 17 Parkwoods Rd

City State Zip Code
Manhasset NY 11030-1509

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

Name of Employer Occupation
Skybridge Capital CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE3SEA7

Amount of Each Receipt this Period
2300.00

C. Full Name (Last, First, Middle Initial)
Deidre Scaramucci

Mailing Address 17 Parkwoods Rd

City State Zip Code
Manhasset NY 11030-1509

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE3SAQ1

Amount of Each Receipt this Period
2700.00

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

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

7700.00

**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 59 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Deidre Scaramucci

Mailing Address 17 Parkwoods Rd

City State Zip Code
Manhasset NY 11030-1509

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2015

Transaction ID : VNW3EE3SE82

Amount of Each Receipt this Period
2300.00

B. Full Name (Last, First, Middle Initial)
Bart M. Schwartz

Mailing Address PO Box 431
FI 17

City State Zip Code
South Salem NY 10590-0431

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

Name of Employer Occupation
Guidepost Solutions LLC Attorney/business executive

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
12 / 26 / 2015

Transaction ID : VNW3EE3QJZ4

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Kathleen Shanley

Mailing Address 100 Banks Ave
Apt 1202

City State Zip Code
Rockville Centre NY 11570-6205

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2015

Transaction ID : VNW3EE32PD6

Amount of Each Receipt this Period
250.00

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

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

5250.00

**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 60 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Gregg Sheiowitz

Mailing Address 1756 Corcoran St NW
3A

City Washington State DC Zip Code 20009-2467

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

Name of Employer Zurich North America Occupation Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : VNW3EE1RYH6

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Stephen B. Siegel

Mailing Address PO Box 5010

City Monroe State CT Zip Code 06468-8200

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

Name of Employer CBRE Occupation Real Estate Broker

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
 12 / 31 / 2015

Transaction ID : VNW3EE3TEC2

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Wendy Siegel

Mailing Address PO Box 5010

City Monroe State CT Zip Code 06468-8200

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

Name of Employer N/A Occupation Homemaker

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
 12 / 31 / 2015

Transaction ID : VNW3EE3TEH1

Amount of Each Receipt this Period
2700.00

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

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

5900.00

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

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

FOR LINE NUMBER: PAGE 61 OF 160
(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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
James Simons

Mailing Address 1060 5th Ave

City State Zip Code
New York NY 10128-0104

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

Name of Employer Occupation
Renaissance Technologies Money Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1ZAC7

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
James Simons

Mailing Address 1060 5th Ave

City State Zip Code
New York NY 10128-0104

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

Name of Employer Occupation
Renaissance Technologies Money Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1ZAD5

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
Michael C. Slade

Mailing Address 114 Piping Rock Rd

City State Zip Code
Locust Valley NY 11560-2507

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

Name of Employer Occupation
Lanco Corporation Executive

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
 12 / 18 / 2015

Transaction ID : VNW3EE3NH02

Amount of Each Receipt this Period
1200.00

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

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

6600.00

**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 62 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Ruth Slade

Mailing Address 114 Piping Rock Rd

City State Zip Code
Locust Valley NY 11560-2507

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

Name of Employer Occupation
N/A Homemaker

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
12 / 18 / 2015

Transaction ID : VNW3EE3P5B2

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
Stuart P. Slotnick

Mailing Address 620 8th Ave
FI 23

City State Zip Code
New York NY 10018-1669

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

Name of Employer Occupation
Buchanan Ingersoll & Rooney P.C. Managing Shareholder, New York Office

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
12 / 11 / 2015

Transaction ID : VNW3EE3F306

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Michael Soroudi

Mailing Address PO Box 5266

City State Zip Code
Beverly Hills CA 90209-5266

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

Name of Employer Occupation
Real Estate Investor Maxxam Enterprises

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
11 / 16 / 2015

Transaction ID : VNW3EE2T8Z4

Amount of Each Receipt this Period
500.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Eric Spitz

Mailing Address 914 Westwood Blvd

City Los Angeles State CA Zip Code 90024-2905

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

Name of Employer Self Occupation Real Estate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VNW3EE3F6A1

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Michael P Stafford

Mailing Address 1320 Rxr Plz

City Uniondale State NY Zip Code 11556-1320

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

Name of Employer Farrell Fritz, P.C. Occupation Attorney

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 / 02 / 2015

Transaction ID : VNW3EE38TS7

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Michael P Stafford

Mailing Address 1320 Rxr Plz

City Uniondale State NY Zip Code 11556-1320

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

Name of Employer Farrell Fritz, P.C. Occupation Attorney

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 / 02 / 2015

Transaction ID : VNW3EE38TT5

Amount of Each Receipt this Period
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Shanti Stanton

Mailing Address 3219 McKinley street NW

City Washington State DC Zip Code 20015

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

Name of Employer subject matter Occupation lobbyist

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
 10 / 21 / 2015

Transaction ID : VNW3EE1RVV9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Daniel Stern

Mailing Address 556 Industrial Way W

City Eatontown State NJ Zip Code 07724-4236

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

Name of Employer Diversified Imports, D.I.C. Co. Inc. Occupation Vice President

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
 10 / 26 / 2015

Transaction ID : VNW3EE2NEQ6

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City Englewood Cliffs State NJ Zip Code 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NEQ6E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

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 65 OF 160
(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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Mara Talpins

Mailing Address 1060 Bayhead Dr

City State Zip Code
Mamaroneck NY 10543-4701

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : VNW3EE3F355

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Daniel Tate

Mailing Address 4813 Quebec St NW

City State Zip Code
Washington DC 20016-3228

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

Name of Employer Occupation
Forbes-Tate Lobbyist

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
 10 / 13 / 2015

Transaction ID : VNW3EE1FVG1

Amount of Each Receipt this Period
500.00

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

Mailing Address 5049 Cathedral Ave NW

City State Zip Code
Washington DC 20016-2624

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

Name of Employer Occupation
ogilvy government relations lobbyist

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
 12 / 23 / 2015

Transaction ID : VNW3EE3Q4T7

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 160
	<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)
Kathleen Rice for Congress

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

Mailing Address 515 N Midland Ave

City State Zip Code
Nyack NY 10960-1205

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

Name of Employer Occupation
TGI Healthwork Healthcare

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
11 / 23 / 2015

Transaction ID : VNW3EE39Q93

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City State Zip Code
West Somerville MA 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 29 / 2015

Transaction ID : VNW3EE39Q93E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Jonathan Tisch

Mailing Address 667 Madison Ave
FI 19

City State Zip Code
New York NY 10065-8029

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

Name of Employer Occupation
Loews Hotels Chairman/CEO

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
12 / 31 / 2015

Transaction ID : VNW3EE3V9Z8

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 67 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Lizzie Tisch

Mailing Address 667 Madison Ave

City State Zip Code
New York NY 10065-8029

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

Name of Employer Occupation
Self Employed Entrepreneur

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
 12 30 2015

Transaction ID : VNW3EE3SRZ4

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Jim Toes

Mailing Address 22 Barnard Pl

City State Zip Code
Manhasset NY 11030-2102

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

Name of Employer Occupation
Security Traders Association President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 01 2015

Transaction ID : VNW3EE37QV0

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Rocco L Trotta

Mailing Address 3 Aerial Way

City State Zip Code
Syosset NY 11791-5501

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

Name of Employer Occupation
LiRo Engineers President

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
 10 22 2015

Transaction ID : VNW3EE1TSG2

Amount of Each Receipt this Period
2700.00

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: (check only one)	PAGE 68 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Benjamin Turner

Mailing Address 309 16th St SE

City Washington State DC Zip Code 20003-2423

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

Name of Employer Porterfield, Lowenthal, Fettig & Sears Occupation Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2015

Transaction ID : VNW3EE1T0A3

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Veneto Capital Management LLC

Mailing Address 9301 Wilshire Blvd Ste 420

City Beverly Hills State CA Zip Code 90210-6144

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

Name of Employer Occupation

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 / 31 / 2015

Transaction ID : VNW3EE465Y0

Amount of Each Receipt this Period
 1000.00

LLC - Members below if itemized. Permissible funds.

C. Full Name (Last, First, Middle Initial)
Faraz Daneshgar

Mailing Address 100 Hilgard Ave

City Los Angeles State CA Zip Code 90024-2517

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

Name of Employer Veneto Capital Management LLC Occupation Manager

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 / 31 / 2015

Transaction ID : VNW3EE46606

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Joshua Wanderer

Mailing Address 66 Chauncey Ln

City State Zip Code
Lawrence NY 11559-2824

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE2NEE5

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City State Zip Code
Englewood Cliffs NJ 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NEE5E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Morris Weinstein

Mailing Address 455 Ocean Ave

City State Zip Code
Lawrence NY 11559-2718

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

Name of Employer Occupation
Self-Employed Investor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE2NEK5

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

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

1000.00

**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 70 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NEK5E

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Roy Weinstein

Mailing Address **4 Kaywood Rd**

City **Port Washington** State **NY** Zip Code **11050-1410**

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

Name of Employer **Rapid Steel Supply Corp.** Occupation **Business Owner / Engineer**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1150.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : VNW3EE1W8P9

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
Roy Weinstein

Mailing Address **4 Kaywood Rd**

City **Port Washington** State **NY** Zip Code **11050-1410**

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

Name of Employer **Rapid Steel Supply Corp.** Occupation **Business Owner / Engineer**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 23 / 2015

Transaction ID : VNW3EE352F3

Amount of Each Receipt this Period

300.00

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: (check only one)	PAGE 71 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Rachel Weisman

Mailing Address 861 Dickens St
Woodmere

City Woodmere State NY Zip Code 11598-2422

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

Name of Employer Weisman Law Group Occupation Attorney

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
12 / 31 / 2015

Transaction ID : VNW3EE4BK7

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4599.21

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4BK7E

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Michael Weiss

Mailing Address 388 Donmoor Rd

City Lawrence State NY Zip Code 11559-1807

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

Name of Employer Occupation
Self-Employed MD

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
10 / 26 / 2015

Transaction ID : VNW3EE2NEV8

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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: (check only one)	PAGE 72 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address **PO Box 1543**

City **Englewood Cliffs** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **11650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2NEV8E

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Samuel Whitehorn

Mailing Address **455 Massachusetts Ave NW
FI 12**

City **Washington** State **DC** Zip Code **20001-2621**

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

Name of Employer **McBee Strategies** Occupation **Managing Director**

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
11 / 02 / 2015

Transaction ID : VNW3EE2CD19

Amount of Each Receipt this Period

500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address **233 Pennsylvania Ave SE
FI 2**

City **Washington** State **DC** Zip Code **20003-1121**

FEC ID number of contributing federal political committee. **C C00409730**

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

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2015

Transaction ID : VNW3EE2CD19E

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

**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 73 OF 160
	<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)
Kathleen Rice for Congress

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

Mailing Address 3030 Beechwood Ln

City Falls Church State VA Zip Code 22042-3138

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

Name of Employer Capitol Hill Strategies Occupation Vice President

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
 10 / 22 / 2015

Transaction ID : VNW3EE1XVV6

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
FI 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1XVV6E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Charles Wooters

Mailing Address 9633 Weathered Oak Ct

City Bethesda State MD Zip Code 20817-1308

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

Name of Employer Mehlman Castagnetti Occupation lobbyist

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
 12 / 16 / 2015

Transaction ID : VNW3EE3MBP7

Amount of Each Receipt this Period
500.00

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

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

1000.00

**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 74 OF 160
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) Willie Wren Sr		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 27 / 2015	
Mailing Address 6 Melrick Ct		Transaction ID : VNW3EE39QM0	
City Westbury	State NY	Zip Code 11590-2426	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Central Brooklyn Community Service Cor	Occupation Housing Development		* Earmarked Contribution: See Below
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 29 / 2015	
Mailing Address PO Box 441146		Transaction ID : VNW3EE39QM0E	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C C00401224			
Name of Employer	Occupation Conduit total listed in Agg. field		[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4599.21		

Full Name (Last, First, Middle Initial) Frank Zarabi		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 16 / 2015	
Mailing Address 6017 Randolph St		Transaction ID : VNW3EE2T902	
City Commerce	State CA	Zip Code 90040-3417	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer FamBrands	Occupation Businessman		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 75 OF 160
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Esther Zeidman

Mailing Address 92 Margaret Ave

City Lawrence State NY Zip Code 11559-1826

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE2NES2

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
NORPAC

Mailing Address PO Box 1543

City Englewood Cliffs State NJ Zip Code 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2015

Transaction ID : VNW3EE2NES2E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Marci Zinn

Mailing Address 465 W End Ave
Fl 5

City New York State NY Zip Code 10024-4926

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

Name of Employer Occupation Jaspan Schlesinger Lawyer

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
 10 / 27 / 2015

Transaction ID : VNW3EE2DGD9

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

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

550.00

**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 76 OF 160
	<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)
Kathleen Rice for Congress

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4599.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2015
Transaction ID : VNW3EE2DGD9E
 Amount of Each Receipt this Period
 50.00
[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Gilda Schiff Zirinsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Beech Dr
 City Great Neck State NY Zip Code 11024-1230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Business-Real Estate
 Self-Employed
 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
 10 / 20 / 2015
Transaction ID : VNW3EE1RV71
 Amount of Each Receipt this Period
 250.00

C. Jay Zises
 Full Name (Last, First, Middle Initial)
 Mailing Address 955 5th Ave
 City New York State NY Zip Code 10075-1738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Investor
 Self-Employed
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015
Transaction ID : VNW3EE37T29
 Amount of Each Receipt this Period
 2700.00

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

2950.00
 211305.00

**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 77 OF 160
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE5MD83

Amount of Each Receipt this Period
14.27

* In-Kind: Event Expenses

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

14.27

14.27

**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 78 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Aflac Political Action Committee (Aflac PAC)

Mailing Address Worldwide Headquarters
1932 Wynnton Road

City Columbus State GA Zip Code 31999-0001

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VNW3EE3SZJ7

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Air Line Pilots Association PAC

Mailing Address 1625 Massachusetts Ave NW

City Washington State DC Zip Code 20036-2204

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VNW3EE3SZQ7

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Allied Pilots Association Political Action Committee

Mailing Address 14600 Trinity Blvd
Ste 500

City Fort Worth State TX Zip Code 76155-2559

FEC ID number of contributing federal political committee. **C C00267849**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VNW3EE3SZV8

Amount of Each Receipt this Period
1000.00

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

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

7000.00

**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 79 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. America's Health Insurance Plans PAC (AHIP PAC)

Full Name (Last, First, Middle Initial)
America's Health Insurance Plans PAC (AHIP PAC)

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite 500

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : VNW3EE3SZM3

Amount of Each Receipt this Period
 1000.00

B. American Association for Justice PAC

Full Name (Last, First, Middle Initial)
American Association for Justice PAC

Mailing Address 777 6th St NW
Ste 200

City Washington State DC Zip Code 20001-3707

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VNW3EE3P699

Amount of Each Receipt this Period
 1000.00

C. American Bankers Association PAC (BANKPAC)

Full Name (Last, First, Middle Initial)
American Bankers Association PAC (BANKPAC)

Mailing Address 1120 Connecticut Ave NW
Ste 600

City Washington State DC Zip Code 20036-3959

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VNW3EE3P6A7

Amount of Each Receipt this Period
 1500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 80 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
American Crystal Sugar Company Political Action Committee

Mailing Address 101 3rd St N

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2015

Transaction ID : VNW3EE2B3B0

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists Political Action Committee

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE467N1

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists Political Action Committee

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE467P9

Amount of Each Receipt this Period
 1500.00

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

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

7500.00

**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 81 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
AT&T Inc. Federal Political Action Committee (AT&T Federal PAC)

Mailing Address 208 S Akard St
Ste 2701

City State Zip Code
Dallas TX 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 12 / 2015

Transaction ID : VNW3EE2P655

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Baker & Hostetler PAC

Mailing Address 45 Rockefeller Plz

City State Zip Code
New York NY 10111-0230

FEC ID number of contributing federal political committee. **C** C00174227

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : VNW3EE3DQQ4

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Building Relationships in Diverse Geographic Environments PAC (Bridge PAC)

Mailing Address 499 S Capitol St SW
Ste 422

City State Zip Code
Washington DC 20003-4028

FEC ID number of contributing federal political committee. **C** C00399196

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : VNW3EE3P6C1

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 82 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Citigroup PAC - Federal

Mailing Address 1101 Pennsylvania Ave NW
Ste 1000

City Washington State DC Zip Code 20004-2523

FEC ID number of contributing federal political committee. **C C00008474**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE467Q7

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Comcast Corporation and NBCUniversal Political Action Committee

Mailing Address 1701 John F Kennedy Blvd
Fl 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2015

Transaction ID : VNW3EE3SZX4

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Cozen O'Connor Political Action Committee

Mailing Address 1 Liberty Pl
1650 Market Street

City Philadelphia State PA Zip Code 19103-4201

FEC ID number of contributing federal political committee. **C C00312777**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : VNW3EE36QX7

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
CSX Corporation Good Government Fund

Mailing Address 1331 Pennsylvania Ave NW
Ste 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

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 / 10 / 2015

Transaction ID : VNW3EE3F2W4

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
CULAC the PAC of Credit Union National Association

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite 600

City Washington State DC Zip Code 20004-2620

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1XW55

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Dairy Farmers of America, Inc. - DEPAC (Dairy Educational Political Action Committee)

Mailing Address PO Box 909700

City Kansas City State MO Zip Code 64190-9700

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

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 / 18 / 2015

Transaction ID : VNW3EE3P6D9

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Exelon Corporation Political Action Committee (EXELONPAC)

Full Name (Last, First, Middle Initial)
Exelon Corporation Political Action Committee (EXELONPAC)

Mailing Address 101 Constitution Ave NW
Suite 400 East

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer Occupation

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 / 18 / 2015

Transaction ID : VNW3EE3P6F5

Amount of Each Receipt this Period
 1000.00

B. Florida Sugar Cane League PAC

Full Name (Last, First, Middle Initial)
Florida Sugar Cane League PAC

Mailing Address 1301 Pennsylvania Ave NW
Ste 401

City Washington State DC Zip Code 20004-1701

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

Name of Employer Occupation

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 / 09 / 2015

Transaction ID : VNW3EE2H1C0

Amount of Each Receipt this Period
 1000.00

C. FLUOR Corporation PAC

Full Name (Last, First, Middle Initial)
FLUOR Corporation PAC

Mailing Address 6700 Las Colinas Blvd

City Irving State TX Zip Code 75039-2902

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

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 / 31 / 2015

Transaction ID : VNW3EE465T8

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 85 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
General Electric PAC (GEPAC)

Mailing Address 1299 Pennsylvania Ave NW
Ste 900

City Washington State DC Zip Code 20004-2407

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : VNW3EE4APP2

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Glover Park Group LLC PAC (Glover Park PAC)

Mailing Address 700 13th St NW
Ste 600

City Washington State DC Zip Code 20005-5998

FEC ID number of contributing federal political committee. **C C00466094**

Name of Employer Occupation

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
10 / 30 / 2015

Transaction ID : VNW3EE2A4D0

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Michigan Sugar Company Growers Political Action Committee

Mailing Address 2600 S Euclid Ave

City Bay City State MI Zip Code 48706-3414

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : VNW3EE2V0Y9

Amount of Each Receipt this Period
2000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Microsoft Corporation Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 16011 NE 36th Way
97017

City Redmond State WA Zip Code 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 21 / 2015

Transaction ID : VNW3EE1SX99

Amount of Each Receipt this Period
 1000.00

B. Minn-Dak Farmers Cooperative Sugar PAC (MDSPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 7525 Red River Rd

City Wahpeton State ND Zip Code 58075-9705

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : VNW3EE2ZX80

Amount of Each Receipt this Period
 1000.00

C. National Association of Health Underwriters PAC (HUPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1212 New York Ave NW
Ste 1100

City Washington State DC Zip Code 20005-3987

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VNW3EE3P6P0

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. National Beer Wholesalers Association Political Action Committee

Full Name (Last, First, Middle Initial)
National Beer Wholesalers Association Political Action Committee

Mailing Address 1101 King St
Ste 600

City Alexandria State VA Zip Code 22314-2965

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : VNW3EE3QQK1

Amount of Each Receipt this Period
2500.00

B. National Emergency Medicine PAC

Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC

Mailing Address PO Box 619911

City Dallas State TX Zip Code 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : VNW3EE3PVF0

Amount of Each Receipt this Period
1500.00

C. Oracle America, Inc. Political Action Committee (Oracle PAC)

Full Name (Last, First, Middle Initial)
Oracle America, Inc. Political Action Committee (Oracle PAC)

Mailing Address 1015 15th St NW
Ste 200

City Washington State DC Zip Code 20005-2635

FEC ID number of contributing federal political committee. **C** C00323048

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
90.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : VNW3EE369X6

Amount of Each Receipt this Period
90.00

* In-Kind: Event Space

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

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

4090.00

**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 88 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

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

Mailing Address 1301 K St NW
Ste 800W

City Washington State DC Zip Code 20005-3333

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 08 / 2015

Transaction ID : VNW3EE3DQV6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Prudential Financial Inc. Federal Acion Committee (AKA - Prudential Financial PAC)

Mailing Address 751 Broad St
Fl 14

City Newark State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee. **C C00127779**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : VNW3EE3F2Y0

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
New Democratic Coalition PAC

Mailing Address 233 Pennsylvania Ave SE
Fl 2

City Washington State DC Zip Code 20003-1121

FEC ID number of contributing federal political committee. **C C00409730**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2015

Transaction ID : VNW3EE3F2Y0E

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

2750.00

**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 89 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Snake River Sugar Company Political Action Committee

Full Name (Last, First, Middle Initial)
Snake River Sugar Company Political Action Committee

Mailing Address 1951 S Saturn Way
Ste 100

City Boise State ID Zip Code 83709-2924

FEC ID number of contributing federal political committee. **C** C00326389

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2015

Transaction ID : VNW3EE202R4

Amount of Each Receipt this Period
 1000.00

B. Southern Minnesota Beet Sugar Cooperative Political Action Committee

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

Mailing Address PO Box 500
83550 County Road 21

City Renville State MN Zip Code 56284-0500

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015

Transaction ID : VNW3EE1XW47

Amount of Each Receipt this Period
 1000.00

C. Supporting House Problem Solvers - SHP PAC

Full Name (Last, First, Middle Initial)
Supporting House Problem Solvers - SHP PAC

Mailing Address 1050 17th St NW
Ste 590

City Washington State DC Zip Code 20036-5592

FEC ID number of contributing federal political committee. **C** C00563601

Name of Employer Occupation

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 / 22 / 2015

Transaction ID : VNW3EE3PVN8

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
The Boeing Company Political Action Committee

Mailing Address 929 Long Bridge Dr

City State Zip Code
Arlington VA 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : VNW3EE467R5

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
The Dow Chemical Company Employees PAC (DOWPAC)

Mailing Address 2030 Dow Ctr

City State Zip Code
Midland MI 48674-1500

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : VNW3EE467S3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
The Goldman Sachs Group, Inc. Political Action Committee

Mailing Address 101 Constitution Ave NW
Suite 1000 East

City State Zip Code
Washington DC 20001-2133

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 / 2015

Transaction ID : VNW3EE467T1

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 91 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
The Home Depot Inc. PAC

Mailing Address 1155 F St NW
Ste 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 16 / 2015

Transaction ID : VNW3EE2TBQ9

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
U.S. Travel Association PAC

Mailing Address 1100 New York Ave NW
Ste 450W

City Washington State DC Zip Code 20005-3934

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 18 / 2015

Transaction ID : VNW3EE3P6R6

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 Bren Rd E

City Minnetonka State MN Zip Code 55343-9664

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 26 / 2015

Transaction ID : VNW3EE1XV46

Amount of Each Receipt this Period
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 160
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Verizon Communications Inc. Good Government Club (Verizon PAC)

Mailing Address 1300 I St NW
Ste 400

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VNW3EE3P6Z1

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Verizon Communications Inc. Good Government Club (Verizon PAC)

Mailing Address 1300 I St NW
Ste 400

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : VNW3EE3P709

Amount of Each Receipt this Period
1000.00

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

Amount of Each Receipt this Period

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

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

2000.00

60340.00

**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 93 OF 160
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Rice Victory Fund

Mailing Address PO Box 744

City Mineola State NY Zip Code 11501-0744

FEC ID number of contributing federal political committee. **C** C00578450

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 71940.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : VNW3EE5YVT4

Amount of Each Receipt this Period
 25232.07

Transfer of Joint Proceeds

B. Full Name (Last, First, Middle Initial)
Dorothy Breslin

Mailing Address 500 Old Country Rd

City Garden City State NY Zip Code 11530-1939

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE5YYY2

Amount of Each Receipt this Period
 2700.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Dorothy Breslin

Mailing Address 500 Old Country Rd

City Garden City State NY Zip Code 11530-1939

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE5YYZ9

Amount of Each Receipt this Period
 2700.00

[MEMO ITEM]

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

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

25232.07

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

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

FOR LINE NUMBER: PAGE 94 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Wilbur Breslin

Mailing Address 500 Old Country Rd

City State Zip Code
Garden City NY 11530-1901

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

Name of Employer Occupation
Breslin Realty President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE5YZ07

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Wilbur Breslin

Mailing Address 500 Old Country Rd

City State Zip Code
Garden City NY 11530-1901

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

Name of Employer Occupation
Breslin Realty President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : VNW3EE5YZ15

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Martin Edelman

Mailing Address 75 E 55th St
FI 1

City State Zip Code
New York NY 10022-3205

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

Name of Employer Occupation
Paul Hastings Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : VNW3EE5YYQ6

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

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: PAGE 95 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Martin Edelman

Mailing Address 75 E 55th St
FI 1

City State Zip Code
New York NY 10022-3205

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

Name of Employer Occupation
Paul Hastings Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2015

Transaction ID : VNW3EE5YYR4

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Sander Flaum

Mailing Address 630 Park Ave
Apt 9B

City State Zip Code
New York NY 10065-6560

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

Name of Employer Occupation
Flaum Navigators Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 23 / 2015

Transaction ID : VNW3EE5YYT0

Amount of Each Receipt this Period
1700.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Sander Flaum

Mailing Address 630 Park Ave
Apt 9B

City State Zip Code
New York NY 10065-6560

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

Name of Employer Occupation
Flaum Navigators Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 23 / 2015

Transaction ID : VNW3EE5YYV8

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

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: PAGE 96 OF 160
(check only one)
 11a 11b 11c 11d
 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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Brian Gold

Mailing Address 600 Food Center Dr

City State Zip Code
Bronx NY 10474-7037

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

Name of Employer Occupation
Sultana Distribution CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2015

Transaction ID : VNW3EE5YYW6

Amount of Each Receipt this Period
100.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Brian Gold

Mailing Address 600 Food Center Dr

City State Zip Code
Bronx NY 10474-7037

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

Name of Employer Occupation
Sultana Distribution CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 15 / 2015

Transaction ID : VNW3EE5YYX4

Amount of Each Receipt this Period
2700.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Nikki Smithers

Mailing Address 6 Frost Mill Rd

City State Zip Code
Mill Neck NY 11765-1100

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

Name of Employer Occupation
Self-Employed Foundation Treasurer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2015

Transaction ID : VNW3EE5YYS2

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

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

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

0.00

25232.07

**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 97 OF 160
	<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)
Kathleen Rice for Congress

A. Full Name (Last, First, Middle Initial)
Buchanan Ingersoll & Rooney PC Committee for Effective Government 'BIRPC PAC'

Mailing Address 1 Oxford Ctr
301 Giant Street, 20th Floor

City Pittsburgh State PA Zip Code 15219-1400

FEC ID number of contributing federal political committee. **C** C00195388

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2015

Transaction ID : VNW3EE3M880

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
New York State Insurance Fund

Mailing Address 199 Church St

City New York State NY Zip Code 10007-1100

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
675.96

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 13 / 2015

Transaction ID : VNW3EE1G7N6

Amount of Each Receipt this Period
675.96

Workers' Compensation Policy Refund

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

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

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

2175.96

2175.96

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. 1 & 1 Internet Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 701 Lee Rd Ste 300		Amount of Each Disbursement this Period 5.01
City Chesterbrook	State PA	
Zip Code 19087-5612	Purpose of Disbursement Website Hosting	Transaction ID : VNV469S8K44
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Accurate Word		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 4481 White Plains Ln		Amount of Each Disbursement this Period 597.25
City White Plains	State MD	
Zip Code 20695-3018	Purpose of Disbursement Postage	Transaction ID : VNV469S7Z09
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 82.23
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VNV469S2X23
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	684.49
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 99 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 503.01 Transaction ID : VNV469S38K9
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 1.00 Transaction ID : VNV469S6911
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.46 Transaction ID : VNV469S74H6
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	504.47
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 100 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 1.39 Transaction ID : VNV469S7FX4
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 34.86 Transaction ID : VNV469S8BC9
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 2.43 Transaction ID : VNV469SAPB1
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	38.68
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 101 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 40.04
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	Transaction ID : VNV469SBCJ3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 5.44
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	Transaction ID : VNV469SBVM0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 5.52
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	
Candidate Name	Category/Type	Transaction ID : VNV469SDC97
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	51.00
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 102 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 3.58
City Somerville	State MA	
Zip Code 02144-3132	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VNV469SDS77
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 160.00
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Travel	Transaction ID : VNV469S77H3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 60.00
City Washington	State DC	
Zip Code 20002-4214	Purpose of Disbursement Travel	Transaction ID : VNV469S8W43
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	223.58
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 103 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 376.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S8W51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 55.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S9330
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 126.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S9M93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	557.00
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 104 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 126.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S9MA1
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 116.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S9P55
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 146.00
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	Transaction ID : VNV469S9P63
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	388.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Avis Car Rental		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 6 Sylvan Way		Amount of Each Disbursement this Period 229.37
City Parsippany	State NJ	
Zip Code 07054-3826	Purpose of Disbursement Travel	Transaction ID : VNV469S8XV5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Avis Car Rental		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 6 Sylvan Way		Amount of Each Disbursement this Period 14.70
City Parsippany	State NJ	
Zip Code 07054-3826	Purpose of Disbursement Travel	Transaction ID : VNV469SAX90
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bistro Cacao		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 320 Massachusetts Ave NE		Amount of Each Disbursement this Period 944.04
City Washington	State DC	
Zip Code 20002-5702	Purpose of Disbursement Event Space and Catering	Transaction ID : VNV469SDCA5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1188.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 104 W 40th St Suites 400		Amount of Each Disbursement this Period 184.61
City New York	State NY Zip Code 10018-3617	
Purpose of Disbursement Travel	Category/Type	Transaction ID : VNV469S8796
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 104 W 40th St Suites 400		Amount of Each Disbursement this Period 5.54
City New York	State NY Zip Code 10018-3617	
Purpose of Disbursement Credit Card Processing Fee	Category/Type	Transaction ID : VNV469S87A4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 104 W 40th St Suites 400		Amount of Each Disbursement this Period 47.65
City New York	State NY Zip Code 10018-3617	
Purpose of Disbursement Travel	Category/Type	Transaction ID : VNV469S92Y1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	237.80
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 107 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 104 W 40th St Suites 400		Amount of Each Disbursement this Period 1.43
City New York	State NY	
Zip Code 10018-3617	Purpose of Disbursement Credit Card Processing Fee	Transaction ID : VNV469S92Z8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Blacklane		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 104 W 40th St Suites 400		Amount of Each Disbursement this Period 69.59
City New York	State NY	
Zip Code 10018-3617	Purpose of Disbursement Travel	Transaction ID : VNV469SCX79
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Calogero's Restaurant		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 919 Franklin Ave		Amount of Each Disbursement this Period 3025.00
City Garden City	State NY	
Zip Code 11530-2909	Purpose of Disbursement Event Space and Catering	Transaction ID : VNV469SBMF6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3096.02
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 108 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Carefirst Blue Cross Blue Shield		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 840 1st St NE Union Center Plaza		Amount of Each Disbursement this Period 365.78 Transaction ID : VNV469S38M7
City Washington State DC Zip Code 20065-0003	Purpose of Disbursement Health Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Carefirst Blue Cross Blue Shield		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 840 1st St NE Union Center Plaza		Amount of Each Disbursement this Period 365.78 Transaction ID : VNV469S8FB0
City Washington State DC Zip Code 20065-0003	Purpose of Disbursement Health Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. D.C. Department of Employment Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 4058 Minnesota Ave NE 4058 Minnesota Ave NE		Amount of Each Disbursement this Period 364.92 Transaction ID : VNV469S62P2
City Washington State DC Zip Code 20019-3540	Purpose of Disbursement Unemployment Insurance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1096.48
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 109 OF 160			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 153.10
City Atlanta	State GA	
Zip Code 30320-0980	Purpose of Disbursement Travel	Transaction ID : VNV469S87D8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 430 S Capitol St SE		Amount of Each Disbursement this Period 14.27
City Washington	State DC	
Zip Code 20003-4024	Purpose of Disbursement Event Expenses	Transaction ID : VNV3EE5MD83I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) c. First Data		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 1522.88
City Atlanta	State GA	
Zip Code 30342-1651	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VNV469S38N5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1690.25
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 110 OF 160			
	<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)
Kathleen Rice for Congress

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 10 / 05 / 2015
Amount of Each Disbursement this Period: 1119.66
Transaction ID : VNV469S38Q0

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 10 / 05 / 2015
Amount of Each Disbursement this Period: 1.52
Transaction ID : VNV469S38R8

C. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 11 / 03 / 2015
Amount of Each Disbursement this Period: 1360.29
Transaction ID : VNV469S81K2

SUBTOTAL of Disbursements This Page (optional) 2481.47
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 111 OF 160	
	<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)
Kathleen Rice for Congress

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 11 / 03 / 2015
Amount of Each Disbursement this Period: 833.76
Transaction ID : VNV469S81M0

B. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 11 / 03 / 2015
Amount of Each Disbursement this Period: 2.05
Transaction ID : VNV469S81N8

C. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector NE Ste 2000
City Atlanta State GA Zip Code 30342-1651
Purpose of Disbursement Credit Card Processing Fees
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)
State: District:

Date of Disbursement: 12 / 03 / 2015
Amount of Each Disbursement this Period: 1037.39
Transaction ID : VNV469SBCM9

SUBTOTAL of Disbursements This Page (optional) 1873.20
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 112 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. First Data		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 358.14
City Atlanta	State GA Zip Code 30342-1651	
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : VNV469SBCN7
Candidate Name		
Office Sought:	Disbursement For: 2016	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Data		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 2.29
City Atlanta	State GA Zip Code 30342-1651	
Purpose of Disbursement Credit Card Processing Fees		Transaction ID : VNV469SBCE5
Candidate Name		
Office Sought:	Disbursement For: 2016	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. HM&CO		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 233 Pennsylvania Ave SE Fl 2		Amount of Each Disbursement this Period 445.31
City Washington	State DC Zip Code 20003-1121	
Purpose of Disbursement Reimbursement (Vendors that aggregate above \$200 listed below)		Transaction ID : VNV469S7Z16
Candidate Name		
Office Sought:	Disbursement For: 2016	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	805.74
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 113 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Firehook Bakery		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 215 Pennsylvania Ave SE		Amount of Each Disbursement this Period 245.31
City Washington	State DC	
Zip Code 20003-1187		[MEMO ITEM] *
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HM&CO		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 233 Pennsylvania Ave SE FI 2		Amount of Each Disbursement this Period 200.00
City Washington	State DC	
Zip Code 20003-1121		[MEMO ITEM] *
Purpose of Disbursement Event Space	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mandate Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address PO Box 80151		Amount of Each Disbursement this Period 1650.00
City Portland	State OR	
Zip Code 97280-1151		[MEMO ITEM] *
Purpose of Disbursement Consultant - Strategy	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1650.00
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 114 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial)
A. Mandate Media

Mailing Address PO Box 80151

City Portland State OR Zip Code 97280-1151

Purpose of Disbursement
Consultant - Strategy

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 06 / 2015

Amount of Each Disbursement this Period
1650.00

Transaction ID : VNV469S8EJ3

Full Name (Last, First, Middle Initial)
B. Mandate Media

Mailing Address PO Box 80151

City Portland State OR Zip Code 97280-1151

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 23 / 2015

Amount of Each Disbursement this Period
1500.00

Transaction ID : VNV469S9NM3

Full Name (Last, First, Middle Initial)
c. Mandate Media

Mailing Address PO Box 80151

City Portland State OR Zip Code 97280-1151

Purpose of Disbursement
Consultant - Strategy

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
12 / 07 / 2015

Amount of Each Disbursement this Period
1650.00

Transaction ID : VNV469SBMB6

SUBTOTAL of Disbursements This Page (optional)..... 4800.00

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 115 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Margaret May		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 151 Linden Rd		Amount of Each Disbursement this Period 1500.00 Transaction ID : VNV469S38J1
City Mineola State NY Zip Code 11501-1519	Purpose of Disbursement Consultant - Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Margaret May		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 151 Linden Rd		Amount of Each Disbursement this Period 1500.00 Transaction ID : VNV469S80H6
City Mineola State NY Zip Code 11501-1519	Purpose of Disbursement Consultant - Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Margaret May		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2015
Mailing Address 151 Linden Rd		Amount of Each Disbursement this Period 1500.00 Transaction ID : VNV469SCTK8
City Mineola State NY Zip Code 11501-1519	Purpose of Disbursement Consultant - Compliance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4500.00
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 116 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 498.80 Transaction ID : VNV469S87B2
City Washington	State DC	
Zip Code 20003-4006	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Neuberger Berman Group LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 605 3rd Ave		Amount of Each Disbursement this Period 550.00 Transaction ID : VNV469SCX46
City New York	State NY	
Zip Code 10158-0180	Purpose of Disbursement Event Space	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New Partners Teleservices		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address PO Box 5021		Amount of Each Disbursement this Period 810.00 Transaction ID : VNV469SAXB6
City Saint Cloud	State MN	
Zip Code 56302-5021	Purpose of Disbursement Paid Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1858.80
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 117 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 375.00 Transaction ID : VNV469S38W0
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 1750.00 Transaction ID : VNV469S38X8
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 1750.00 Transaction ID : VNV469S7TT3
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3875.00
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 118 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 375.00 Transaction ID : VNV469S7TV1
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 1750.00 Transaction ID : VNV469SAXA8
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 375.00 Transaction ID : VNV469SBMC2
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Office Rent Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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 119 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2550.00 Transaction ID : VNV469S2WT0
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Software	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 11.16 Transaction ID : VNV469S9P39
City New York State NY Zip Code 10006-1745	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 14.12 Transaction ID : VNV469S9P47
City New York State NY Zip Code 10006-1745	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2575.28
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 120 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Oracle America, Inc. Political Action Committee (Oracle PAC)		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 1015 15th St NW Ste 200		Amount of Each Disbursement this Period 90.00
City Washington	State DC	
Zip Code 20005-2635	Purpose of Disbursement Event Space	Transaction ID : VNW3EE369X6I
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Taxes	Transaction ID : VNV469S2WW5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Invoice	Transaction ID : VNV469S2WX3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1350.80
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 121 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll	Transaction ID : VNV469S62Q9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect	State KY	
Zip Code 40059	Purpose of Disbursement Payroll	Transaction ID : VNV469S62R7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Taxes	Transaction ID : VNV469S6929
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3229.50
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 122 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 66.30
City Rochester State NY Zip Code 14625-2396	Purpose of Disbursement Payroll - Invoice	
Candidate Name	Category/Type	Transaction ID : VNV469S6937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22
City Rochester State NY Zip Code 14625-2396	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : VNV469S7K53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect State KY Zip Code 40059	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : VNV469S7K61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2093.52
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 123 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28 Transaction ID : VNV469S7TZ2
City Rochester State NY Zip Code 14625-2396	Purpose of Disbursement Payroll - Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80 Transaction ID : VNV469S7V00
City Rochester State NY Zip Code 14625-2396	Purpose of Disbursement Payroll - Invoice	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22 Transaction ID : VNV469S8XZ6
City Rochester State NY Zip Code 14625-2396	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3287.30
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 124 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect	State KY Zip Code 40059	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VNV469S8Y04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Taxes	Candidate Name	Transaction ID : VNV469S9346
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Invoice	Candidate Name	Transaction ID : VNV469S9354
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1260.08
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 125 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll	Transaction ID : VNV469SAPC9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect	State KY	
Zip Code 40059	Purpose of Disbursement Payroll	Transaction ID : VNV469SAPD7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Taxes	Transaction ID : VNV469SAXC4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3229.50
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 126 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Invoice	Transaction ID : VNV469SAXD1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll	Transaction ID : VNV469SD2A5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect	State KY	
Zip Code 40059	Purpose of Disbursement Payroll	Transaction ID : VNV469SD2B3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2085.02
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 127 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28 Transaction ID : VNV469SDC63
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Taxes	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80 Transaction ID : VNV469SDC71
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Invoice	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2027.22 Transaction ID : VNV469SDY53
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3287.30
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 128 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 2027.22
City Prospect	State KY Zip Code 40059	
Purpose of Disbursement Payroll	Candidate Name	Transaction ID : VNV469SDY61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1202.28
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Taxes	Candidate Name	Transaction ID : VNV469SEK81
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 57.80
City Rochester	State NY Zip Code 14625-2396	
Purpose of Disbursement Payroll - Invoice	Candidate Name	Transaction ID : VNV469SEK99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1260.08
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 129 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Eric Phillips		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 190 Bleecker St Apt 26		Amount of Each Disbursement this Period 2378.78
City New York	State NY	
Zip Code 10012-1414		Transaction ID : VNV469S7MD7
Purpose of Disbursement Reimbursement (Vendors that aggregate above \$200 listed below)	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 172.20
City Atlanta	State GA	
Zip Code 30320-0980		Transaction ID : VNV469S7NS5
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial) c. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 406.20
City Atlanta	State GA	
Zip Code 30320-0980		Transaction ID : VNV469S7NZ2
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

[MEMO ITEM]
*

SUBTOTAL of Disbursements This Page (optional).....	2378.78
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 130 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 316.20
City Atlanta	State GA	
Zip Code 30320-0980	Purpose of Disbursement Travel	Transaction ID : VNV469S7P00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO Box 20980		Amount of Each Disbursement this Period 360.50
City Atlanta	State GA	
Zip Code 30320-0980	Purpose of Disbursement Travel	Transaction ID : VNV469S7P18
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Mackey's Public House		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 1823 L St NW		Amount of Each Disbursement this Period 244.70
City Washington	State DC	
Zip Code 20036-3832	Purpose of Disbursement Event Catering	Transaction ID : VNV469S7NJ0
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Marriott Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 140 L St SE		Amount of Each Disbursement this Period 303.97
City Washington	State DC	
Zip Code 20003-3335	Purpose of Disbursement Lodging	Transaction ID : VNV469S7NN3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 56.81
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469S7MP9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Priceline.com		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 800 Connecticut Avenue		Amount of Each Disbursement this Period 156.39
City Norwalk	State CT	
Zip Code 06854	Purpose of Disbursement Travel	Transaction ID : VNV469S7P34
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 64.12
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7MJ7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 6.64
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7MK5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 68.91
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NP1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 9.90
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NQ9
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 13.40
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NR7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 71.09
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NT3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 37.72
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NV1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 9.29
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NW9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 10.52
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NX7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 8.86
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S7NY5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. The Alchar Printing Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 599 Pawling Ave		Amount of Each Disbursement this Period 5821.22
City Troy	State NY	
Zip Code 12180-5823	Purpose of Disbursement Printing of Campaign Materials	Transaction ID : VNV469S2WV7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sandler Reiff Lamb Rosenstein & Birkenstock, P.C.		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2015
Mailing Address 1025 Vermont Ave NW Ste 300		Amount of Each Disbursement this Period 140.00
City Washington	State DC	
Zip Code 20005-6302	Purpose of Disbursement Legal Services	Transaction ID : VNV469SD2C1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5961.22
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 136 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. SKD Knickerbocker		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 594 Broadway Rm 805		Amount of Each Disbursement this Period 12000.00
City New York	State NY	
Zip Code 10012-3257		Transaction ID : VNV469S5RJ1
Purpose of Disbursement Consulting - Media	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Spirit Airlines, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 2800 Executive Way		Amount of Each Disbursement this Period 551.18
City Miramar	State FL	
Zip Code 33025-6542		Transaction ID : VNV469S8W28
Purpose of Disbursement Travel	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Spirit Airlines, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 2800 Executive Way		Amount of Each Disbursement this Period 8.00
City Miramar	State FL	
Zip Code 33025-6542		Transaction ID : VNV469S8W35
Purpose of Disbursement Meals	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12559.18
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 137 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Spirit Airlines, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 2800 Executive Way		Amount of Each Disbursement this Period 30.00
City Miramar	State FL	
Zip Code 33025-6542	Purpose of Disbursement Travel	Transaction ID : VNV469S9306
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Storage Quarters Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 999 Stewart Ave		Amount of Each Disbursement this Period 139.00
City Garden City	State NY	
Zip Code 11530-4929	Purpose of Disbursement Storage Unit Rental	Transaction ID : VNV469S3248
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Storage Quarters Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address 999 Stewart Ave		Amount of Each Disbursement this Period 139.00
City Garden City	State NY	
Zip Code 11530-4929	Purpose of Disbursement Storage Unit Rental	Transaction ID : VNV469S7TY5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	308.00
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 138 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Storage Quarters Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 999 Stewart Ave		Amount of Each Disbursement this Period 6139.00
City Garden City	State NY	
Zip Code 11530-4929	Purpose of Disbursement Storage Unit Rental	Transaction ID : VNV469SB802
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Conrad Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 3000.00
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Consulting - Fundraising	Transaction ID : VNV469S38Y6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Conrad Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 410 1st St SE Ste 310		Amount of Each Disbursement this Period 3000.00
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Consulting - Fundraising	Transaction ID : VNV469S8FM1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6139.00
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 139 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. The Frost Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 3701 Porter St NW		Amount of Each Disbursement this Period 3238.10
City Washington	State DC	
Zip Code 20016-3103	Purpose of Disbursement Consultant - Fundraising	Transaction ID : VNV469S9NN1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Frost Group		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2015
Mailing Address 3701 Porter St NW		Amount of Each Disbursement this Period 4000.00
City Washington	State DC	
Zip Code 20016-3103	Purpose of Disbursement Consultant - Fundraising	Transaction ID : VNV469SBQ63
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The New York Times		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address O P # 371456		Amount of Each Disbursement this Period 37.01
City Pittsburgh	State PA	
Zip Code 15250-0001	Purpose of Disbursement Subscription	Transaction ID : VNV469S4X00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7275.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. The New York Times		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address O P # 371456		Amount of Each Disbursement this Period 37.01
City Pittsburgh	State PA	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : VNV469S8T89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. The New York Times		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address O P # 371456		Amount of Each Disbursement this Period 37.01
City Pittsburgh	State PA	
Purpose of Disbursement Subscription	Candidate Name	Transaction ID : VNV469SBMD0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) c. Tri Star Graphics Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2015
Mailing Address PO Box 7013 11 Red Maple Drive North		Amount of Each Disbursement this Period 1259.82
City Wantagh	State NY	
Purpose of Disbursement Printing of Campaign Materials	Candidate Name	Transaction ID : VNV469S9CF4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	1333.84
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 141 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Tri Star Graphics Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2015
Mailing Address PO Box 7013 11 Red Maple Drive North		Amount of Each Disbursement this Period 5271.77
City Wantagh	State NY	
Zip Code 11793-0613		Transaction ID : VNV469SDC55
Purpose of Disbursement Printing of Campaign Materials	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 30 Broad St		Amount of Each Disbursement this Period 8000.00
City New York	State NY	
Zip Code 10004-2909		Transaction ID : VNV469S38H3
Purpose of Disbursement Consultant - Fundraising	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 30 Broad St		Amount of Each Disbursement this Period 8000.00
City New York	State NY	
Zip Code 10004-2909		Transaction ID : VNV469S80K1
Purpose of Disbursement Consultant - Fundraising	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21271.77
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 142 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 30 Broad St		Amount of Each Disbursement this Period 1741.85 Transaction ID : VNV469S80M9
City New York State NY Zip Code 10004-2909	Purpose of Disbursement Reimbursement (Vendors that aggregate above \$200 listed below)	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 554.00 Transaction ID : VNV469S8899 [MEMO ITEM] *
City Washington State DC Zip Code 20002-4214	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Grille		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 630 Old Country Rd		Amount of Each Disbursement this Period 216.31 Transaction ID : VNV469S8B46 [MEMO ITEM] *
City Garden City State NY Zip Code 11530-3468	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1741.85
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 143 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. FedEx.com		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address 3965 Airways Blvd		Amount of Each Disbursement this Period 32.74
City Memphis	State TN	
Zip Code 38116-5017	Purpose of Disbursement Postage	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx.com		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address 3965 Airways Blvd		Amount of Each Disbursement this Period 24.23
City Memphis	State TN	
Zip Code 38116-5017	Purpose of Disbursement Postage	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FedEx.com		Date of Disbursement MM / DD / YYYY 11 / 03 / 2015
Mailing Address 3965 Airways Blvd		Amount of Each Disbursement this Period 18.84
City Memphis	State TN	
Zip Code 38116-5017	Purpose of Disbursement Postage	[MEMO ITEM] *
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 19.75
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	[MEMO ITEM] *
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 16.50
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	[MEMO ITEM] *
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 16.50
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	[MEMO ITEM] *
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 16.50
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	Transaction ID : VNV469S88K8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 19.75
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	Transaction ID : VNV469S88M6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 33.00
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	Transaction ID : VNV469S88N4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 8.25
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	Transaction ID : VNV469S88Q9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Long Island Rail Road		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO Box 350383		Amount of Each Disbursement this Period 16.50
City Jamaica	State NY	
Zip Code 11435-0383	Purpose of Disbursement Travel	Transaction ID : VNV469S88V1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 7.30
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469S88P2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 9.30
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469S88R7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 8.80
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469S88S5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 21.80
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469S88T3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 17.80
City New York State NY Zip Code 10006-1745	Purpose of Disbursement Travel	
Candidate Name		Transaction ID : VNV469S8B54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 500 8th Ave		Amount of Each Disbursement this Period 36.45
City New York State NY Zip Code 10018-6555	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : VNV469S88B5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 500 8th Ave		Amount of Each Disbursement this Period 149.80
City New York State NY Zip Code 10018-6555	Purpose of Disbursement Office Supplies	
Candidate Name		Transaction ID : VNV469S88H2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 500 8th Ave		Amount of Each Disbursement this Period 343.00
City New York	State NY	
Zip Code 10018-6555	Purpose of Disbursement Office Supplies	Transaction ID : VNV469S88J0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 14.60
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S8849
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 14.17
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S8857
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 30 Broad St		Amount of Each Disbursement this Period 8000.00
City New York State NY Zip Code 10004-2909	Purpose of Disbursement Consultant - Fundraising	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNV469SBMA8
State: District:		

Full Name (Last, First, Middle Initial) B. Tucker Green Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 30 Broad St		Amount of Each Disbursement this Period 79.73
City New York State NY Zip Code 10004-2909	Purpose of Disbursement Reimbursement (Vendors that Aggregate Over \$200 Listed Below)	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNV469SBME8
State: District:		

Full Name (Last, First, Middle Initial) c. FedEx.com		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 3965 Airways Blvd		Amount of Each Disbursement this Period 15.57
City Memphis State TN Zip Code 38116-5017	Purpose of Disbursement Postage	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNV469SFRB3 [MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8079.73
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 151 OF 160			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 12.30
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469SFRC1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 10.80
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469SFRD8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 12.96
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469SFRE6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 18.80
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469SFRF4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. NYC Taxi & Limosine Commission		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 40 Rector St		Amount of Each Disbursement this Period 9.30
City New York	State NY	
Zip Code 10006-1745	Purpose of Disbursement Travel	Transaction ID : VNV469SFRG2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 2755 Jackson Ave		Amount of Each Disbursement this Period 48.33
City Long Island City	State NY	
Zip Code 11101-2917	Purpose of Disbursement Travel	Transaction ID : VNV469S8W69
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	48.33
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 153 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 12.99
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Meals	Category/Type	Transaction ID : VNV469S8W85
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 17.13
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VNV469S8FC8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 17.86
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VNV469S8FD6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	47.98
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 154 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 36.20
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FE4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 57.44
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FF2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 16.96
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FG0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	110.60
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 155 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 29.15
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FH8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 17.99
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FJ6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 17.13
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8FK3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	64.27
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 156 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 28.48
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VNV469SBCK1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 16.62
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VNV469SCX53
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 17.09
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Postage	Category/Type	Transaction ID : VNV469SCX61
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	62.09
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 157 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. UPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 26.80
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Shipping	Candidate Name	Transaction ID : VNV469SDCR4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 2341 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1.20
City Washington	State DC Zip Code 20020-9996	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S8K78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 2341 Pennsylvania Ave SE		Amount of Each Disbursement this Period 0.98
City Washington	State DC Zip Code 20020-9996	
Purpose of Disbursement Postage	Candidate Name	Transaction ID : VNV469S9314
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	28.98
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 158 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2015
Mailing Address 2341 Pennsylvania Ave SE		Amount of Each Disbursement this Period 0.98
City Washington State DC Zip Code 20020-9996	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : VNV469S9P21
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2015
Mailing Address 2341 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1.20
City Washington State DC Zip Code 20020-9996	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : VNV469SBKN2
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 2341 Pennsylvania Ave SE		Amount of Each Disbursement this Period 0.98
City Washington State DC Zip Code 20020-9996	Purpose of Disbursement Postage	
Candidate Name	Category/Type	Transaction ID : VNV469SDCS1
Office Sought: House Senate President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3.16
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 159 OF 160	
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. Brittany Wise		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 9143 Cranesbill Trace Apt 515		Amount of Each Disbursement this Period 597.75
City Prospect	State KY	Zip Code 40059
Purpose of Disbursement Reimbursement (Vendors that aggregate above \$200 listed below)		Transaction ID : VNV469S2WS2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 235.00
City Washington	State DC	Zip Code 20002-4214
Purpose of Disbursement Travel		Transaction ID : VNV469S3NS3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: _____	District: _____	
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 50 Massachusetts Ave NE		Amount of Each Disbursement this Period 6.75
City Washington	State DC	Zip Code 20002-4214
Purpose of Disbursement Meals		Transaction ID : VNV469S3NW6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: _____	District: _____	
		[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	597.75
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 160 OF 160			
	<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)
Kathleen Rice for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 343.00
City Chicago	State IL	Zip Code 60666-0100
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Transaction ID : VNV469S3NZ0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Transaction ID	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Transaction ID	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] *	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	125769.49