



**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 74

Write or Type Committee Name

MICHEL FAULKNER FOR CONGRESS

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	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)).....	78812.89	217594.65
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	78812.89	217594.65
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	94122.79	205586.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	94122.79	205586.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2144.20	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	6000.00	

**For further information contact:**

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
 Toll Free 800-424-9530  
 Local 202-694-1100

**POST-ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

MICHEL FAULKNER FOR CONGRESS

Report Covering the Period: From:    To:

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="02"/> <input type="text" value="2010"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="03"/> <input type="text" value="2010"/> (date after general election)  through <input type="text" value="11"/> <input type="text" value="22"/> <input type="text" value="2010"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (Use Schedule A)		
<input type="text" value="49226.00"/>	<input type="text" value="126024.65"/>	<input type="text" value="500.00"/>
(ii) Unitemized		
<input type="text" value="25586.89"/>	<input type="text" value="74468.25"/>	<input type="text" value="810.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="74812.89"/>	<input type="text" value="200492.90"/>	<input type="text" value="1310.00"/>
(b) Political Party Committees		
<input type="text" value="3000.00"/>	<input type="text" value="3000.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="1000.00"/>	<input type="text" value="13851.75"/>	<input type="text" value="1000.00"/>

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	250.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
78812.89	217594.65	2310.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	903.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
78812.89	218497.65	2310.00

POST ELECTION DETAILED SUMMARY PAGE

Write or Type Committe Name

MICHEL FAULKNER FOR CONGRESS

Report the covering period

From:

10

14

2010

To:

11

22

2010

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
94122.79	205586.13	13177.32
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED  
SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )		
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
94122.79	205586.13	13177.32

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

78812.89	217594.65	2310.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

94122.79	205586.13	13177.32
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	17454.10
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	78812.89
25. SUBTOTAL(add Line 23 and Line 24) .....	96266.99
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	94122.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	2144.20

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 74  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<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)  
MICHEL FAULKNER FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel R. Benson

Mailing Address 188 East 76th St.

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Kasowitz Benson Torres & Friedman LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.7166

Amount of Each Receipt this Period  
500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Edmund Bergassi

Mailing Address 35 Portman Rd

City State Zip Code  
New Rochelle NY 10801

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

Name of Employer Occupation  
Bergassi Group LLC President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.7170

Amount of Each Receipt this Period  
1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Andrew M Blum

Mailing Address 410 Park Avenue

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
C. L. King & Associates Managing Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.7196

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

**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 8 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**MICHEL FAULKNER FOR CONGRESS**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Barbara E Brunson</p> <p>Mailing Address 8900 170th Street Suite 51</p> <p>City State Zip Code Jamaica NY 11432</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation N/A N/A</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 9 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.7223</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">2400.00</span></p> <p>Contribution</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Dan Catanzaro</p> <p>Mailing Address 200 North Dearborn Street, #4605</p> <p>City State Zip Code Chicago IL 60601</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation American Eagle Airlines Pilot</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 7 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.7259</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Contribution</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Camera Clifton</p> <p>Mailing Address 4432 Emerson Avenue</p> <p>City State Zip Code Dallas TX 75205</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Self Marketing Executive</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 0 1 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.7281</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Contribution</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">4400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



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

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

FOR LINE NUMBER: PAGE 9 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**MICHEL FAULKNER FOR CONGRESS**

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

Mailing Address 79 South Lakeside Avenue

City State Zip Code  
Lake Hopatcong NJ 07849

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CWS Company Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11AI.7328

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 79 South Lakeside Avenue

City State Zip Code  
Lake Hopatcong NJ 07849

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
CWS Company MGR

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11AI.7330

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 131 Airline Drive Suite 202

City State Zip Code  
Metarie LA 70001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

**Transaction ID:** SA11AI.7342

Amount of Each Receipt this Period  
2400.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 2900.00

**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 10 / 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address 131 Airline Drive  
Suite 202

City State Zip Code  
Metairie LA 70001

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

Name of Employer Woodvine Group, LLC Occupation President & CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

**Transaction ID:** SA11AI.7344

Amount of Each Receipt this Period  
2400.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
kenney m dixon

Mailing Address 8499 greenville ave suite 105

City State Zip Code  
dallas TX 75231

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

Name of Employer self Occupation general

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

**Transaction ID:** SA11AI.7352

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stuart Epperson

Mailing Address 3780 Will Scarlet Road

City State Zip Code  
Winston-Salem NC 27104

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

Name of Employer Salem Broadcasting Occupation Chairman

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.7389

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3900.00**

**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 11 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Nita Lepori Ford	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 5404 Westgrove Dr	<b>Transaction ID:</b> SA11AI.7431
	City State Zip Code Dallas TX 75248	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer N/A Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elliott Forgash	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address 389 Ogden Ave	<b>Transaction ID:</b> SA11AI.7435
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Tri Realty Mgmt Corp Occupation Manager Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jack Forgash	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 389 Ogden Ave	<b>Transaction ID:</b> SA11AI.7433
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Tri Realty Mgmt Corp Occupation Management Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> 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 12 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. david freeman

Mailing Address 3053 fillmore 111

City State Zip Code  
san francisco CA 94123

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

Name of Employer Occupation  
ashfield capital p[artners investment management

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7443

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 6C Nobhill

City State Zip Code  
Roseland NJ 07068

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

Name of Employer Occupation  
Standard & Poors Corp Investor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.7447

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 2700 Polo Ln

City State Zip Code  
Plano TX 75093

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

Name of Employer Occupation  
PPG Investments LLC Investment Advisor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.7459

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 13 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Ms. Jae Greer

Mailing Address PO Box 94

City State Zip Code  
West Mystic CT 06388

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

Name of Employer Occupation  
Edwards Angell Palmer & Dodge Legal Administrator

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.7489

Amount of Each Receipt this Period  
100.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
James and Veronica Guerriero

Mailing Address 1003 Meadow Ct

City State Zip Code  
Southlake TX 76092

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

Name of Employer Occupation  
None None

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.7500

Amount of Each Receipt this Period  
250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
James B Hallock

Mailing Address 3 Aspetuck Lane

City State Zip Code  
Westport CT 06880

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

Name of Employer Occupation  
GE Capital Managing Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.7508

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

**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 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Alice H Hanley

Mailing Address 250 Jungle Rd.

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
Lexington Management VP Investments

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 1 0

**Transaction ID:** SA11AI.7512

Amount of Each Receipt this Period  
2400.00

Contribution

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

Mailing Address 110 e 59th st

City State Zip Code  
New york NY 10022

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

Name of Employer Occupation  
Hunnicutt & Co finance

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.7578

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 428 Pleasant Run

City State Zip Code  
Murphy TX 75094

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

Name of Employer Occupation  
IMA of Texas Insurance Broker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

**Transaction ID:** SA11AI.7599

Amount of Each Receipt this Period  
2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4650.00**

**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 15 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
thomas j kavaler

Mailing Address 80 pine street

City State Zip Code  
nw york NY 10005

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

Name of Employer self employed Occupation taxpayer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA11AI.7636  
 Amount of Each Receipt this Period: 250.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Ms. Janet Claire Kerr

Mailing Address 802 Williamsburg Drive

City State Zip Code  
Ennis TX 75119

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

Name of Employer Ennis ISD Occupation Teacher

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA11AI.7646  
 Amount of Each Receipt this Period: 250.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mari A Kilroy

Mailing Address 1165 Fifth Ave

City State Zip Code  
NYC NY 10029

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

Name of Employer Prudential Financial Occupation marketing

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 29 / 2010  
**Transaction ID:** SA11AI.7650  
 Amount of Each Receipt this Period: 2400.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2900.00**

**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 17 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Brian Patrick Martin  
Mailing Address 77 Park Avenue  
City New York State NY Zip Code 10016  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BPM & Company Inc. Occupation Real Estate  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 11 / 01 / 2010  
Transaction ID: SA11AI.7740  
Amount of Each Receipt this Period 250.00  
Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
Erica Mason  
Mailing Address 1400 Fifth Ave  
City New York State NY Zip Code 10026  
FEC ID number of contributing federal political committee. **C**  
Name of Employer iGavel Occupation Executive Vice President  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 10 / 21 / 2010  
Transaction ID: SA11AI.7746  
Amount of Each Receipt this Period 1000.00  
Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Spencer McDonald  
Mailing Address 613 N. Bailey Avenue  
City Fort Worth State TX Zip Code 76107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SPM Consulting Services Inc. Occupation Sales  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt 10 / 27 / 2010  
Transaction ID: SA11AI.7777  
Amount of Each Receipt this Period 2400.00  
Contribution 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3650.00  
**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 18 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address 157 E 81st St

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Abdiel Capital Investment Management

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** SA11AI.7834

Amount of Each Receipt this Period  
250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Dr. David Mosman

Mailing Address 43 Forest Hills Drive

City State Zip Code  
Wheeling WV 26003

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

Name of Employer Occupation  
Wheeling Hospital Pediatrician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 1 0

**Transaction ID:** SA11AI.7844

Amount of Each Receipt this Period  
250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Robert F Murchison

Mailing Address 1450 Three Lincoln Centre

City State Zip Code  
Dallas TX 75240

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

Name of Employer Occupation  
Murchison Capital Partners Energy

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**Transaction ID:** SA11AI.7848

Amount of Each Receipt this Period  
250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**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 19 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address One Berkshire Rd

City State Zip Code  
Rockville Centre NY 11570

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

Name of Employer Occupation  
First American Title Insurance Corp President & CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: SA11AI.7856

Amount of Each Receipt this Period  
250.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mitchell Nordon

Mailing Address 233 W. 77th St

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Diamondback Capital Research

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	1	0

Transaction ID: SA11AI.7870

Amount of Each Receipt this Period  
250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Dr. Nicola Opdycke

Mailing Address 218 N. Prairie Smoke Circle

City State Zip Code  
Whitefish MT 59937

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

Name of Employer Occupation  
self retired psychologist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	1	0

Transaction ID: SA11AI.7884

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 20 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address 16 Ridgewood av

City Keene State NH Zip Code 03431

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

Name of Employer Bible Literacy Project LLC Occupation Executive Assistant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 26 / 2010  
**Transaction ID:** SA11AI.7902  
 Amount of Each Receipt this Period: 300.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Auguta H Petrone

Mailing Address PO Box 1037

City Dublin State NH Zip Code 03444

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

Name of Employer homemaker Occupation homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 23 / 2010  
**Transaction ID:** SA11AI.7922  
 Amount of Each Receipt this Period: 300.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. GREGORY L POHLMAN

Mailing Address 7220 LINDELL BLVD

City SAINT LOUIS State MO Zip Code 63130

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

Name of Employer SCHROEDER & ASSOCIATES PC Occupation CPA

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 20 / 2010  
**Transaction ID:** SA11AI.7931  
 Amount of Each Receipt this Period: 600.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**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 21 / 74  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address Not Provided

City State Zip Code  
Brooklyn NY 11201

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

Name of Employer Occupation  
New York Board of Rabbis Rabbi

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.7933

Amount of Each Receipt this Period  
500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
James W. Ressler

Mailing Address 3220 Pleasant View Drive

City State Zip Code  
Manheim PA 17545

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

Name of Employer Occupation  
Ressler Propane Businessman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 1 0

**Transaction ID:** SA11AI.7948

Amount of Each Receipt this Period  
500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael S Robinson

Mailing Address New York Staffing Services Inc

City State Zip Code  
New York NY 10005

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

Name of Employer Occupation  
New York Staffing Services Inc. President/CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

**Transaction ID:** SA11AI.7966

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

**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 22 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

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

Mailing Address 426 Clermont Ave

City State Zip Code  
Brooklyn NY 11238

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

Name of Employer Occupation  
New York Staffing and Microbin President & CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** SA11AI.7964

Amount of Each Receipt this Period  
1900.00

Contribution

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

Mailing Address 90 Park Ave Suite 1710

City State Zip Code  
New York NY 10016

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

Name of Employer Occupation  
Rosensteel Law Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** SA11AI.7990

Amount of Each Receipt this Period  
500.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Michael E Sachs

Mailing Address 135 Central Park West Apt 6S

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Self Surgeon

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** SA11AI.7998

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2900.00**

**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 23 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Andrew W Saul

Mailing Address 300 Maple Avenue, PO Box 635

City State Zip Code  
Katonah NY 10536

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

Name of Employer Self-Employed Occupation  
Private Investor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

**Transaction ID:** SA11AI.8006

Amount of Each Receipt this Period  
2000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steven Schleider

Mailing Address 401 East 74th Street

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
MVS real estate

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

**Transaction ID:** SA11AI.8022

Amount of Each Receipt this Period  
500.00

Contribution

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

Mailing Address 468 Wolf Run Rd

City State Zip Code  
Bartonville TX 76226

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

Name of Employer Self-Employed Occupation  
Counselor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

**Transaction ID:** SA11AI.8041

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**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 24 / 74  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Brenda Six

Mailing Address 920 Van Buren Ave NW

City State Zip Code  
Piedmont OK 73078

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

Name of Employer  
Matrix Plumbing Heat and Air

Occupation  
Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.8055

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Elliott H Snyder

Mailing Address 10719 County Road 2450

City State Zip Code  
Terrell TX 75160

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

Name of Employer  
Self

Occupation  
Psychiatrist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.8069

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Mr. lewis j stuart

Mailing Address 9115 harris corners parkway

City State Zip Code  
charlotte NC 28269

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

Name of Employer  
phenogen sciences inc

Occupation  
president/general manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.8103

Amount of Each Receipt this Period

500.00

Contribution

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

1000.00

**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 25 / 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Dr. Bing Tsay

Mailing Address 1108 La Paloma Ct

City State Zip Code  
Southlake TX 76092

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

Name of Employer Occupation  
All-star Orthopedics Surgeon

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11AI.8167

Amount of Each Receipt this Period  
250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ramona Tuma

Mailing Address 15800 Spectrum Drive  
Apt 1407

City State Zip Code  
Addison TX 75001

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

Name of Employer Occupation  
Just in Time Ministries Speaker and Author

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11AI.8171

Amount of Each Receipt this Period  
2000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Myrtle G Whitmore

Mailing Address 1333 President St

City State Zip Code  
Brooklyn NY 11213

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 1 0

**Transaction ID:** SA11AI.8228

Amount of Each Receipt this Period  
250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

**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 26 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
James R Williams

Mailing Address 8900 170th Street  
Apt 5L

City State Zip Code  
Jamaica NY 11432

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

Name of Employer Occupation  
NBUS Inc Chairman & CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** SA11AI.8240

Amount of Each Receipt this Period  
2400.00

Contribution

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

Mailing Address 9937 Grandview Drive

City State Zip Code  
Denton TX 76207

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 1 0

**Transaction ID:** SA11AI.8248

Amount of Each Receipt this Period  
1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jerry C Wilson

Mailing Address 1160 Kempton Park Lane

City State Zip Code  
Fairview TX 75069

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

Name of Employer Occupation  
- retired - none

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 1 0

**Transaction ID:** SA11AI.8250

Amount of Each Receipt this Period  
1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4400.00**

**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 27 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Norris D. Wolff

Mailing Address 2 Fifth Avenue

City State Zip Code  
New York NY 10011

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

Name of Employer KleinbergKaplanWolff & CohenP.C. Occupation attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	1	0

Transaction ID: SA11AI.8260

Amount of Each Receipt this Period  
250.00

Contribution

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

Mailing Address 6429 Worchester Drive

City State Zip Code  
Nashville TN 37221

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

Name of Employer Desktop Alert Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	1	0

Transaction ID: SA11AI.8278

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	49226.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 74  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
New York Republican State Committee

Mailing Address 315 State Street

City Albany State NY Zip Code 12210

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2010

Transaction ID: SA11B.8628

Amount of Each Receipt this Period  
3000.00

In-kind - Automated Marketing Calls to District Voters

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> 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 29 / 74  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
FAMILY RESEARCH COUNCIL ACTION POLITICAL ACTION COMMITTEE

Mailing Address 801 G STREET NW

City	State	Zip Code
WASHINGTON	DC	20001

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

Name of Employer	Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: SA11C.8551

Amount of Each Receipt this Period

1000.00
---------

Donation

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 74

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Alhambra Ballroom <hr/> Mailing Address 2116 Adam Clayton Powell Blvd <hr/> City New York State NY Zip Code 10027 Purpose of Disbursement Room rental for Job Fair Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8465 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Backlight Communications <hr/> Mailing Address 2576 Broadway <hr/> City New York State NY Zip Code 10025 Purpose of Disbursement Book Purchases for Campaign Donors \$50+ Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8307 Date of Disbursement 10 / 18 / 2010
	Amount of Each Disbursement this Period 2812.50
	Category/ Type 003
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Backlight Communications <hr/> Mailing Address 2576 Broadway <hr/> City New York State NY Zip Code 10025 Purpose of Disbursement Book Sales for \$50+ Contributions Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8426 Date of Disbursement 11 / 06 / 2010
	Amount of Each Disbursement this Period 617.50
	Category/ Type 003
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3930.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Backlight Communications</p> <p>Mailing Address 2576 Broadway</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Book Sales for \$50+ Contributions</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8433</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 646.00</p> <p>Category/Type 003</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Backlight Communications</p> <p>Mailing Address 2576 Broadway</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Book Sales for \$50+ Donors</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8438</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 617.50</p> <p>Category/Type 003</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Brun Group</p> <p>Mailing Address 53 West 106th Street</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8305</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Category/Type 001</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1613.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Brun Group	Transaction ID: SB17.8374 Date of Disbursement 11 / 01 / 2010
	Mailing Address 53 West 106th Street	Amount of Each Disbursement this Period 350.84
	City New York State NY Zip Code 10025	
	Purpose of Disbursement Utilities Candidate Name MICHEL FAULKNER FOR CONGRESS Category/Type 001	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Brun Group	Transaction ID: SB17.8432 Date of Disbursement 11 / 09 / 2010
	Mailing Address 53 West 106th Street	Amount of Each Disbursement this Period 1000.00
	City New York State NY Zip Code 10025	
	Purpose of Disbursement Rent - November Candidate Name MICHEL FAULKNER FOR CONGRESS Category/Type 001	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Brun Group	Transaction ID: SB17.8435 Date of Disbursement 11 / 11 / 2010
	Mailing Address 53 West 106th Street	Amount of Each Disbursement this Period 192.89
	City New York State NY Zip Code 10025	
	Purpose of Disbursement Utilities - October Candidate Name MICHEL FAULKNER FOR CONGRESS Category/Type 001	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

1543.73

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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Brun Group  Mailing Address 53 West 106th Street  City New York State NY Zip Code 10025  Purpose of Disbursement November Rent - Partial Payment Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8442 Date of Disbursement 11 / 17 / 2010  Amount of Each Disbursement this Period 500.00  Category/ Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) CC Advertising  Mailing Address 5900 Fort Drive Suite 302  City Centreville State VA Zip Code 20121  Purpose of Disbursement Automated Calls to 15th District Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8415 Date of Disbursement 11 / 03 / 2010  Amount of Each Disbursement this Period 2761.35  Category/ Type 004
<b>C.</b>	Full Name (Last, First, Middle Initial) Cemusa  Mailing Address 420 Lexington Avenue, Suite 2533  City New York State NY Zip Code 10170  Purpose of Disbursement Bus Shelter Ads - Partial Payment Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8439 Date of Disbursement 11 / 17 / 2010  Amount of Each Disbursement this Period 3000.00  Category/ Type 004

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

**6261.35**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Chase

Transaction ID: SB17.8468  
Date of Disbursement

Mailing Address 322 West 125th St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City State Zip Code  
New York NY 10027

Amount of Each Disbursement this Period

203.75
--------

Purpose of Disbursement  
For Compensation to Field Operation Workers

002
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  Senate  President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Chase

Transaction ID: SB17.8469  
Date of Disbursement

Mailing Address 322 West 125th St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City State Zip Code  
New York NY 10027

Amount of Each Disbursement this Period

203.75
--------

Purpose of Disbursement  
For Payment to Field Operation Workers

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  Senate  President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Chase

Transaction ID: SB17.8470  
Date of Disbursement

Mailing Address 322 West 125th St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City State Zip Code  
New York NY 10027

Amount of Each Disbursement this Period

203.75
--------

Purpose of Disbursement  
For Payment to Field Operation Workers

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  Senate  President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

611.25
--------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8310 Date of Disbursement 10 / 20 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 61.75
	City New York State NY Zip Code 10027	
	Purpose of Disbursement Petty Cash Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	001 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8366 Date of Disbursement 11 / 01 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 101.75
	City New York State NY Zip Code 10027	
	Purpose of Disbursement Petty Cash Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	001 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8367 Date of Disbursement 11 / 01 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 100.00
	City New York State NY Zip Code 10027	
	Purpose of Disbursement Petty Cash Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	001 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

263.50

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8370 Date of Disbursement
	Mailing Address 322 West 125th St	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period
	Purpose of Disbursement Wire Fee - Online Fundraising Transfer	<input type="text" value="15.00"/>
	Candidate Name MICHEL FAULKNER FOR CONGRESS	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8371 Date of Disbursement
	Mailing Address 322 West 125th St	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period
	Purpose of Disbursement Deposit Return Item	<input type="text" value="10.00"/>
	Candidate Name MICHEL FAULKNER FOR CONGRESS	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8372 Date of Disbursement
	Mailing Address 322 West 125th St	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period
	Purpose of Disbursement Deposit return item	<input type="text" value="10.00"/>
	Candidate Name MICHEL FAULKNER FOR CONGRESS	<input type="text" value="001"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="35.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8373 Date of Disbursement 11 / 01 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 2.00
	City New York State NY Zip Code 10027	
	Purpose of Disbursement ATM Fee	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8406 Date of Disbursement 11 / 02 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 400.00
	City New York State NY Zip Code 10027	
	Purpose of Disbursement Out of Pocket Election Day Expenses	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Chase	Transaction ID: SB17.8407 Date of Disbursement 11 / 02 / 2010
	Mailing Address 322 West 125th St	Amount of Each Disbursement this Period 200.00
	City New York State NY Zip Code 10027	
	Purpose of Disbursement Petty Cash - Election Day	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

602.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Michele DeKonty  Mailing Address 1622 Bolton Street  City Baltimore State MD Zip Code 21217  Purpose of Disbursement Petty Cash - Metrocard Purchases for Election Day Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8396 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 300.00
<b>B.</b>	Full Name (Last, First, Middle Initial) DeKonty Consulting Business  Mailing Address 1622 Bolton Street  City Baltimore State MD Zip Code 21217  Purpose of Disbursement Consulting - Political Strategy Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8356 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 1250.00
<b>C.</b>	Full Name (Last, First, Middle Initial) DeKonty Consulting Business  Mailing Address 1622 Bolton Street  City Baltimore State MD Zip Code 21217  Purpose of Disbursement Hotel and Travel Expenses Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8388 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 1700.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Hephzibah House Mailing Address 51 West 75th Street City New York State NY Zip Code 10023 Purpose of Disbursement Hotel Accomodations October Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8388.0 Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 650.00
	[MEMO ITEM]
	Category/ Type 002
<b>B.</b> Full Name (Last, First, Middle Initial) Amtrak Mailing Address 60 Massachussets Ave NE City Washington State DC Zip Code 20002 Purpose of Disbursement October Travel to and from Baltimore Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8388.1 Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 1050.00
	[MEMO ITEM]
	Category/ Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) Esther DeVore Mailing Address 221 East 122nd Street Suite 1603 City New York State NY Zip Code 10035 Purpose of Disbursement Consulting - East Harlem Field Operations Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8297 Date of Disbursement 10 / 18 / 2010
	Amount of Each Disbursement this Period 310.00
	[MEMO ITEM]
	Category/ Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	310.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Esther DeVore <hr/> Mailing Address 221 East 122nd Street Suite 1603 <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Consulting Fee - East Harlem Field Operations <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8332 Date of Disbursement 10 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 260.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Esther DeVore <hr/> Mailing Address 221 East 122nd Street Suite 1603 <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Consulting Fee <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8384 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 310.00
<b>C.</b>	Full Name (Last, First, Middle Initial) El Diario <hr/> Mailing Address 1 MetroTech Center <hr/> City Brooklyn State NY Zip Code 11201 <hr/> Purpose of Disbursement Advertising <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8362 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 1626.00

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

2196.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Michel Faulkner

Transaction ID: SB17.8306  
Date of Disbursement

Mailing Address 121 Manhattan Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

City State Zip Code  
New York NY 10025

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement

Candidate Salary

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

B.

Full Name (Last, First, Middle Initial)  
Michel Faulkner

Transaction ID: SB17.8325  
Date of Disbursement

Mailing Address 121 Manhattan Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

City State Zip Code  
New York NY 10025

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement

Candidate Salary

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

C.

Full Name (Last, First, Middle Initial)  
Michel Faulkner

Transaction ID: SB17.8405  
Date of Disbursement

Mailing Address 121 Manhattan Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City State Zip Code  
New York NY 10025

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement

Candidate Salary

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

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

7500.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# 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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC	Transaction ID: SB17.8454 Date of Disbursement 10 / 14 / 2010
	Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6 City Washington State DC Zip Code 20004 Purpose of Disbursement Online fundraising processing fees Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 15
Amount of Each Disbursement this Period 336.80	
<b>B.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC	Transaction ID: SB17.8455 Date of Disbursement 10 / 14 / 2010
	Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6 City Washington State DC Zip Code 20004 Purpose of Disbursement Online fundraising processing fees Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 15
Amount of Each Disbursement this Period 408.97	
<b>C.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC	Transaction ID: SB17.8456 Date of Disbursement 10 / 18 / 2010
	Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6 City Washington State DC Zip Code 20004 Purpose of Disbursement Online fundraising processing fees Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 15
Amount of Each Disbursement this Period 1075.07	

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

1820.84

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC</p> <p>Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Online fundraising processing fees</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8457</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 457.92</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC</p> <p>Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Online fundraising processing fees</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8458</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 416.69</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC</p> <p>Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Online fundraising processing fees</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8459</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 534.83</p> <p>003 Category/ Type</p>

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

1409.44

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Fundraising by Net LLC</p> <p>Mailing Address c/o ElectionMall Technologies 1101 Pennsylvania Ave NW FI 6</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Online fundraising processing fees</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8460</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 893.76</p> <p>Category/Type 003</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Gospel Uptown</p> <p>Mailing Address 2110 Seventh Avenue</p> <p>City New York State NY Zip Code 10027</p> <p>Purpose of Disbursement Payment for Michel Steele Event - Food, Beverages, Location</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8594</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2780.00</p> <p>Category/Type 003</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gospel Uptown</p> <p>Mailing Address 2110 Seventh Avenue</p> <p>City New York State NY Zip Code 10027</p> <p>Purpose of Disbursement Election Night Party</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8592</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type 001</p>

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

**6173.76**

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Eric Groberg</p> <p>Mailing Address 20 West 64th Street Apartment 34N</p> <p>City New York State NY Zip Code 10023</p> <p>Purpose of Disbursement Out of Pocket Petty Cash Expenses</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8318</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Nicole Johnson</p> <p>Mailing Address 45 Clinton Avenue Apartment 3</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement Consulting - Office Administration</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8320</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Daniel Jordan</p> <p>Mailing Address 1751 2nd Ave. #23A</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Video Production</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8296</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Category/Type 004</p>

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

**740.00**

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Daniel Jordan

Transaction ID: SB17.8345  
Date of Disbursement

Mailing Address 1751 2nd Ave.  
#23A

10 / 26 / 2010

City State Zip Code  
New York NY 10128

Amount of Each Disbursement this Period

Purpose of Disbursement

Video Production

001  
Category/  
Type

600.00

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

B.

Full Name (Last, First, Middle Initial)  
Daniel Jordan

Transaction ID: SB17.8351  
Date of Disbursement

Mailing Address 1751 2nd Ave.  
#23A

10 / 27 / 2010

City State Zip Code  
New York NY 10128

Amount of Each Disbursement this Period

Purpose of Disbursement

Out of Pocket Expenses and Consulting

004  
Category/  
Type

706.88

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

C.

Full Name (Last, First, Middle Initial)  
Daniel Jordan

Transaction ID: SB17.8351.0  
Date of Disbursement

Mailing Address 1751 2nd Ave.  
#23A

10 / 27 / 2010

City State Zip Code  
New York NY 10128

Amount of Each Disbursement this Period

Purpose of Disbursement

Consulting - Video Production Services

004  
Category/  
Type

600.00

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

[MEMO ITEM]

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

1306.88

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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Jordan  Mailing Address 1751 2nd Ave. #23A  City New York State NY Zip Code 10128  Purpose of Disbursement Video Production Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8427 <b>Date of Disbursement</b> 11 / 05 / 2010  Amount of Each Disbursement this Period 686.00  004 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Magnolia Group  Mailing Address P.O. Box 192741  City Dallas State TX Zip Code 75219  Purpose of Disbursement Consulting - Fundraising Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8338 <b>Date of Disbursement</b> 10 / 18 / 2010  Amount of Each Disbursement this Period 2500.00  003 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Magnolia Group  Mailing Address P.O. Box 192741  City Dallas State TX Zip Code 75219  Purpose of Disbursement Consulting - Fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.8375 <b>Date of Disbursement</b> 11 / 01 / 2010  Amount of Each Disbursement this Period 2500.00  003 Category/ Type	

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

**5686.00**

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Martha Lynn Matos-Coll</p> <p>Mailing Address 44 Seaman Ave #K</p> <p>City New York State NY Zip Code 10034</p> <p>Purpose of Disbursement Consulting - Hispanic / Latino Community Outreach</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8313</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Martha Lynn Matos-Coll</p> <p>Mailing Address 44 Seaman Ave #K</p> <p>City New York State NY Zip Code 10034</p> <p>Purpose of Disbursement Out of Pocket Expenses</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8314</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Martha Lynn Matos-Coll</p> <p>Mailing Address 44 Seaman Ave #K</p> <p>City New York State NY Zip Code 10034</p> <p>Purpose of Disbursement Consulting - Hispanic / Latino Community Outreach</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8319</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 001</p>

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

2055.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Martha Lynn Matos-Coll

Transaction ID: SB17.8341  
Date of Disbursement

Mailing Address 44 Seaman Ave  
#K

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	1	0

City New York State NY Zip Code 10034

Amount of Each Disbursement this Period

83.00
-------

Purpose of Disbursement  
Out of Pocket Expenses

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Martha Lynn Matos-Coll

Transaction ID: SB17.8350  
Date of Disbursement

Mailing Address 44 Seaman Ave  
#K

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	0

City New York State NY Zip Code 10034

Amount of Each Disbursement this Period

1300.00
---------

Purpose of Disbursement  
Consulting - Hispanic / Latino Community Outreach

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Martha Lynn Matos-Coll

Transaction ID: SB17.8386  
Date of Disbursement

Mailing Address 44 Seaman Ave  
#K

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City New York State NY Zip Code 10034

Amount of Each Disbursement this Period

1300.00
---------

Purpose of Disbursement  
Consulting - Hispanic / Latino Community Outreach

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: NY District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

2683.00
---------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Martha Lynn Matos-Coll  Mailing Address 44 Seaman Ave #K  City New York State NY Zip Code 10034  Purpose of Disbursement Out of Pocket Expenses Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8410 Date of Disbursement 11 / 02 / 2010  Amount of Each Disbursement this Period 228.00  Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Martha Lynn Matos-Coll  Mailing Address 44 Seaman Ave #K  City New York State NY Zip Code 10034  Purpose of Disbursement Consulting - Hispanic / Latino Community Outreach Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8428 Date of Disbursement 11 / 05 / 2010  Amount of Each Disbursement this Period 725.00  Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Metroplitan Transit Authority  Mailing Address 347 Madison Ave  City New York State NY Zip Code 10017  Purpose of Disbursement Metrocards Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8582 Date of Disbursement 10 / 14 / 2010  Amount of Each Disbursement this Period 27.00  Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	980.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



**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 52 / 74

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) NYC Taxi  Mailing Address 32-02 Queens Blvd  City Long Island City State NY Zip Code 11101 Purpose of Disbursement Travel to Meeting Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8359 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 8.04
<b>B.</b>	Full Name (Last, First, Middle Initial) NYC Taxi  Mailing Address 32-02 Queens Blvd  City Long Island City State NY Zip Code 11101 Purpose of Disbursement Travel to Meeting Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8360 Date of Disbursement 11 / 01 / 2010  Amount of Each Disbursement this Period 5.64
<b>C.</b>	Full Name (Last, First, Middle Initial) NYC Taxi  Mailing Address 32-02 Queens Blvd  City Long Island City State NY Zip Code 11101 Purpose of Disbursement Travel to Meeting Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8361 Date of Disbursement 11 / 01 / 2010  Amount of Each Disbursement this Period 10.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	23.68
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Taharqa Patterson

Transaction ID: SB17.8413  
Date of Disbursement

Mailing Address 53 West 106th Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

City State Zip Code  
New York NY 10025

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
Musical Entertainment for Election Night Event

001
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

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

State: NY District: 15

B.

Full Name (Last, First, Middle Initial)  
Raise Digital

Transaction ID: SB17.8491  
Date of Disbursement

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	1	0

City State Zip Code  
Herndon VA 20171

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Partial invoice payment

003
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

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

State: NY District: 15

C.

Full Name (Last, First, Middle Initial)  
Lee Rouson

Transaction ID: SB17.8346  
Date of Disbursement

Mailing Address 2576 Broadway

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	6	/	2	0	1	0

City State Zip Code  
New York NY 10025

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Musical Entertainment Services - Campaign Events

007
-----

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

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

State: NY District: 15

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

1750.00
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**TOTAL** This Period (last page this line number only) .....

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**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Jack Royster	Transaction ID: SB17.8337 Date of Disbursement																			
	Mailing Address 520 West 56th Street Apartment 2C	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	1	0												
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - Field Operations	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Jack Royster	Transaction ID: SB17.8335 Date of Disbursement																			
	Mailing Address 520 West 56th Street Apartment 2C	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	6		2	0	1	0												
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - Field Operations	<table border="1"><tr><td>920.00</td></tr></table>	920.00																		
920.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Jack Royster	Transaction ID: SB17.8385 Date of Disbursement																			
	Mailing Address 520 West 56th Street Apartment 2C	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	1	0												
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting Fee - Field Operations	<table border="1"><tr><td>800.00</td></tr></table>	800.00																		
800.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2220.00</td></tr></table>	2220.00
2220.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Jack Royster	Transaction ID: SB17.8430 Date of Disbursement																			
	Mailing Address 520 West 56th Street Apartment 2C	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	8	/	2	0	1	0												
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Field Operations Support	<table border="1"><tr><td>300.00</td></tr></table>	300.00																		
300.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Tyletha Samuels	Transaction ID: SB17.8292 Date of Disbursement																			
	Mailing Address 2295 Second Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	4	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	4	/	2	0	1	0												
	City New York State NY Zip Code 10035	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting - Field Operations	<table border="1"><tr><td>200.00</td></tr></table>	200.00																		
200.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Tyletha Samuels	Transaction ID: SB17.8294 Date of Disbursement																			
	Mailing Address 2295 Second Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	5	/	2	0	1	0												
	City New York State NY Zip Code 10035	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Out of Pocket Expenses	<table border="1"><tr><td>257.00</td></tr></table>	257.00																		
257.00																					
	Candidate Name	001 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>757.00</td></tr></table>	757.00
757.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

**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 56 / 74

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Out of Pocket Expenses <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8472 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 200.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Consulting - Field Operations <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8298 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 450.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Out of Pocket Expenses <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8302 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 492.00

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

1142.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8302.0  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

220.00
--------

Purpose of Disbursement  
Volunteer Lunches - 18 Volunteers x \$10

001

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8302.1  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

153.00
--------

Purpose of Disbursement  
Metro Cards for Volunteers - 10 Dailys and 4 Weeklies

002

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8323  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

494.00
--------

Purpose of Disbursement  
Consulting Fee and Out of Pocket Expenses

001

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

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

494.00
--------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Consulting Fee - Field Operations <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8323.0 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">450.00</td> </tr> </table> <hr/> <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	1	0	450.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	5		2	0	1	0														
450.00																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Out of Pocket Expenses <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8326 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">506.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	1	0	506.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	5		2	0	1	0														
506.00																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Tyletha Samuels <hr/> Mailing Address 2295 Second Avenue <hr/> City New York State NY Zip Code 10035 <hr/> Purpose of Disbursement Out of Pocket Expenses <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8357 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">606.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1	0	606.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	8		2	0	1	0														
606.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td style="text-align: right;"><b>1112.00</b></td> </tr> </table>	<b>1112.00</b>
<b>1112.00</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8400  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

1801.00
---------

Purpose of Disbursement  
Consulting Fee - Field Operations and Petty Cash

001

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

B.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8400.0  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

401.00
--------

Purpose of Disbursement  
Miscellaneous Office Supplies

001

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Tyletha Samuels

Transaction ID: SB17.8400.1  
Date of Disbursement

Mailing Address 2295 Second Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	1		2	0	1	0

City State Zip Code  
New York NY 10035

Amount of Each Disbursement this Period

1100.00
---------

Purpose of Disbursement  
Election Day Paid Workers - Literature Distribution

001

Category/  
Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

[MEMO ITEM]

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

1801.00
---------

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

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**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Tyletha Samuels</p> <p>Mailing Address 2295 Second Avenue</p> <p>City New York State NY Zip Code 10035</p> <p>Purpose of Disbursement Volunteer Lunches</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8400.2 <b>Date of Disbursement</b> 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 274.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Tyletha Samuels</p> <p>Mailing Address 2295 Second Avenue</p> <p>City New York State NY Zip Code 10035</p> <p>Purpose of Disbursement Consulting - Field Operations</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8424 <b>Date of Disbursement</b> 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 225.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) LaSonya Thompson</p> <p>Mailing Address 129 MacDonough Apt 4L</p> <p>City Brooklyn State NY Zip Code 11216</p> <p>Purpose of Disbursement Consulting Fee - Office Administration</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8331 <b>Date of Disbursement</b> 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 256.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>481.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) LaSonya Thompson	Transaction ID: SB17.8327 Date of Disbursement																			
	Mailing Address 129 MacDonough Apt 4L	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	5		2	0	1	0												
	City Brooklyn State NY Zip Code 11216	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Consulting Fee - Office Administration	<table border="1"><tr><td>256.00</td></tr></table>	256.00																		
256.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) LaSonya Thompson	Transaction ID: SB17.8399 Date of Disbursement																			
	Mailing Address 129 MacDonough Apt 4L	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	1	0												
	City Brooklyn State NY Zip Code 11216	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Administration	<table border="1"><tr><td>256.00</td></tr></table>	256.00																		
256.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Joe Tricarico	Transaction ID: SB17.8412 Date of Disbursement																			
	Mailing Address 86 High Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	1	0												
	City West Orange State NJ Zip Code 07052	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IT Support	<table border="1"><tr><td>535.00</td></tr></table>	535.00																		
535.00																					
	Candidate Name MICHEL FAULKNER FOR CONGRESS	001 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1047.00</td></tr></table>	1047.00
1047.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Univision Mailing Address PO Box 187 City Teaneck State NJ Zip Code 07666 Purpose of Disbursement Radio Advertising Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8354 Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) US Treasury Mailing Address Internal Revenue Service P.O. Box 804522 City Cincinnati State OH Zip Code 45280-4522 Purpose of Disbursement Quarterly Tax Payment for Salaried Employees Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8434 Date of Disbursement 11 / 11 / 2010
	Amount of Each Disbursement this Period 252.45
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez Mailing Address 311 C Sterling Drive City Brooklyn State NY Zip Code 11209 Purpose of Disbursement Out of Pocket Expenses Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8293 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 158.00
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5410.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez	Transaction ID: SB17.8301 Date of Disbursement 10 / 18 / 2010
	Mailing Address 311 C Sterling Drive	Amount of Each Disbursement this Period 600.00
	City Brooklyn State NY Zip Code 11209	
	Purpose of Disbursement Consulting - Religious Community Outreach	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez	Transaction ID: SB17.8321 Date of Disbursement 10 / 25 / 2010
	Mailing Address 311 C Sterling Drive	Amount of Each Disbursement this Period 60.22
	City Brooklyn State NY Zip Code 11209	
	Purpose of Disbursement Out of Pocket Expenses	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez	Transaction ID: SB17.8342 Date of Disbursement 10 / 26 / 2010
	Mailing Address 311 C Sterling Drive	Amount of Each Disbursement this Period 416.87
	City Brooklyn State NY Zip Code 11209	
	Purpose of Disbursement Out of Pockets and Consulting - Religious Community Outreach	001 Category/ Type
	Candidate Name MICHEL FAULKNER FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1077.09
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez  Mailing Address 311 C Sterling Drive  City Brooklyn State NY Zip Code 11209 Purpose of Disbursement Consulting - Religious Community Outreach Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8342.0 Date of Disbursement 10 / 26 / 2010	Amount of Each Disbursement this Period 300.00  [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez  Mailing Address 311 C Sterling Drive  City Brooklyn State NY Zip Code 11209 Purpose of Disbursement Consulting - Religious Community Outreach Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8349 Date of Disbursement 10 / 26 / 2010	Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez  Mailing Address 311 C Sterling Drive  City Brooklyn State NY Zip Code 11209 Purpose of Disbursement Consulting - Religious Community Outreach Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8387 Date of Disbursement 11 / 01 / 2010	Amount of Each Disbursement this Period 300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Viviana Vazquez Hernandez <hr/> Mailing Address 311 C Sterling Drive <hr/> City Brooklyn State NY Zip Code 11209 <hr/> Purpose of Disbursement Out of Pockets - Travel Expenses <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8409 Date of Disbursement 11 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 22.00 <hr/> Category/ Type 002
<b>B.</b>	Full Name (Last, First, Middle Initial) Visa Cardmember Service <hr/> Mailing Address P.O. Box 15153 <hr/> City Wilmington State DE Zip Code 19886 <hr/> Purpose of Disbursement Visa Payment <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8453 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) 4Over4.com <hr/> Mailing Address 19-41 46th Street <hr/> City Astoria State NY Zip Code 11105 <hr/> Purpose of Disbursement Palm Card Literature <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8453.0 Date of Disbursement 05 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 561.80 <hr/> Category/ Type 006 [MEMO ITEM]

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

2022.00

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) 4Over4.com</p> <p>Mailing Address 19-41 46th Street</p> <p>City Astoria State NY Zip Code 11105</p> <p>Purpose of Disbursement Palm Card Literature</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8453.1</p> <p>Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 379.32</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) New York Republican State Committee</p> <p>Mailing Address 315 State Street</p> <p>City Albany State NY Zip Code 12210</p> <p>Purpose of Disbursement New York State Republican Convention</p> <p>Candidate Name Michel Faulkner</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8453.2</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Syms New York</p> <p>Mailing Address 222 Broadway</p> <p>City New York State NY Zip Code 10024</p> <p>Purpose of Disbursement Clothing for volunteer</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8453.3</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 227.60</p> <p><b>[MEMO ITEM]</b></p>

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address 140 West St City New York State NY Zip Code 10007 Purpose of Disbursement Cell Phone Service Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8453.4 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 259.62
	[MEMO ITEM]
	Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) Visa Cardmember Service Mailing Address P.O. Box 15153 City Wilmington State DE Zip Code 19886 Purpose of Disbursement Visa Payment Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8451 Date of Disbursement 10 / 20 / 2010
	Amount of Each Disbursement this Period 2500.00
	[MEMO ITEM]
	Category/Type 001
<b>C.</b> Full Name (Last, First, Middle Initial) Columbia Copy Center Mailing Address 2790 Broadway City New York State NY Zip Code 10025 Purpose of Disbursement Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8451.0 Date of Disbursement 10 / 18 / 2010
	Amount of Each Disbursement this Period 304.86
	[MEMO ITEM]
	Category/Type 006

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
4Over4.com

Mailing Address 19-41 46th Street

City Astoria State NY Zip Code 11105

Purpose of Disbursement  
Palm Card Literature

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

Transaction ID: SB17.8451.1  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Amount of Each Disbursement this Period

779.61
--------

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Dallas BBQ

Mailing Address 281 West Fordham Road

City New York State NY Zip Code 10468

Purpose of Disbursement  
Campaign Volunteer Event

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

Transaction ID: SB17.8451.2  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	1	0

Amount of Each Disbursement this Period

220.22
--------

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Visa Cardmember Service

Mailing Address P.O. Box 15153

City Wilmington State DE Zip Code 19886

Purpose of Disbursement  
Visa Payment

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

Transaction ID: SB17.8447  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

Amount of Each Disbursement this Period

3500.00
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SUBTOTAL of Disbursements This Page (optional) ..... ▶

3500.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) 4Over4.com	Transaction ID: SB17.8447.0 Date of Disbursement 10 / 20 / 2010
	Mailing Address 19-41 46th Street	Amount of Each Disbursement this Period 916.73
	City Astoria State NY Zip Code 11105	
	Purpose of Disbursement Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	006 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Printing Services Corp	Transaction ID: SB17.8447.1 Date of Disbursement 10 / 21 / 2010
	Mailing Address To Be Determined	Amount of Each Disbursement this Period 838.84
	City Los Angeles State CA Zip Code 90001	
	Purpose of Disbursement Posters Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	006 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) PR Web	Transaction ID: SB17.8447.2 Date of Disbursement 10 / 22 / 2010
	Mailing Address 2084 Alder Street	Amount of Each Disbursement this Period 300.00
	City Ferndale State WA Zip Code 98248	
	Purpose of Disbursement Press Release Distribution Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	004 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[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

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) PR Web</p> <p>Mailing Address 2084 Alder Street</p> <p>City Ferndale State WA Zip Code 98248</p> <p>Purpose of Disbursement Press Release Distribution</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8447.3 <b>Date of Disbursement:</b> 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hephzibah House</p> <p>Mailing Address 51 West 75th Street</p> <p>City New York State NY Zip Code 10023</p> <p>Purpose of Disbursement Hotel Accomodations for Consultant Michele DeKonty</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8447.4 <b>Date of Disbursement:</b> 10 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 260.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Visa Cardmember Service</p> <p>Mailing Address P.O. Box 15153</p> <p>City Wilmington State DE Zip Code 19886</p> <p>Purpose of Disbursement Visa Payment</p> <p>Candidate Name MICHEL FAULKNER FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.8446 <b>Date of Disbursement:</b> 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

**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)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) 4Over4.com <hr/> Mailing Address 19-41 46th Street <hr/> City Astoria State NY Zip Code 11105 <hr/> Purpose of Disbursement Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8446.0 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 457.49
	[MEMO ITEM]
	Category/Type 006
<b>B.</b> Full Name (Last, First, Middle Initial) Hotcards.com <hr/> Mailing Address 1100 East 23rd Street <hr/> City Cleveland State OH Zip Code 44114 <hr/> Purpose of Disbursement Election Day Literature Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8446.1 Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 1179.00
	[MEMO ITEM]
	Category/Type 006
<b>C.</b> Full Name (Last, First, Middle Initial) Vocus PRW Holdings <hr/> Mailing Address 5160 Industrial Place <hr/> City Ferndale State WA Zip Code 98248 <hr/> Purpose of Disbursement Press Release Distribution Candidate Name MICHEL FAULKNER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8446.2 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 360.00
	[MEMO ITEM]
	Category/Type 004

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Visa Cardmember Service <hr/> Mailing Address P.O. Box 15153 <hr/> City Wilmington State DE Zip Code 19886 <hr/> Purpose of Disbursement Visa Card Payment <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8445 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> Category/ Type	
	<b>B.</b> Full Name (Last, First, Middle Initial) Hotcards.com <hr/> Mailing Address 1100 East 23rd Street <hr/> City Cleveland State OH Zip Code 44114 <hr/> Purpose of Disbursement Election Day Literature <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8445.0 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 1900.00 <hr/> Category/ Type 006 [MEMO ITEM]
	<b>C.</b> Full Name (Last, First, Middle Initial) Columbia Copy Center <hr/> Mailing Address 2790 Broadway <hr/> City New York State NY Zip Code 10025 <hr/> Purpose of Disbursement <hr/> Candidate Name MICHEL FAULKNER FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.8445.1 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 456.75 <hr/> Category/ Type 006 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Visa Cardmember Service

Transaction ID: SB17.8593  
Date of Disbursement

Mailing Address P.O. Box 15153

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
1	1		1	5		2	0	1	0

City State Zip Code  
Wilmington DE 19886

Amount of Each Disbursement this Period

288.00
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Purpose of Disbursement  
Monthly Statement Payment

001
Category/ Type

Candidate Name  
MICHEL FAULKNER FOR CONGRESS

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: NY District: 15

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

288.00
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TOTAL This Period (last page this line number only) .....

92723.47
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**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
MICHEL FAULKNER FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Cemusa	Nature of Debt (Purpose): Bus Shelter Ads
Mailing Address 420 Lexington Avenue, Suite 2533	
City State ZIP Code New York NY 10170	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> SD10.8656	
Amount Incurred This Period 3000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Power of Persuasion Media	Nature of Debt (Purpose): Final invoice for completion of video
Mailing Address 133 West 118th Street	
City State ZIP Code New York NY 10026	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID:</b> SD10.4695	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Raise Digital	Nature of Debt (Purpose): Monthly Retainer
Mailing Address 13755 Sunrise Valley Drive Suite 450	
City State ZIP Code Herndon VA 20171	

Outstanding Balance Beginning This Period 3000.00	<b>Transaction ID:</b> SD10.4697	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 2500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	6000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	6000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	6000.00