

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MALONEY FOR CONGRESS

ADDRESS (number and street) 49 EAST 92ND STREET
 Check if different than previously reported. (ACC)
NEW YORK NY 10128

2. **FEC IDENTIFICATION NUMBER** C00273169
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
NY 14

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on [] [] [] in the State of []

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

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

Election on 11 02 2010 in the State of NY

5. Covering Period 10 14 2010 through 11 22 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jeanne Waller

Signature of Treasurer Electronically Filed by Jeanne Waller Date 05 24 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 63

Write or Type Committee Name

MALONEY FOR CONGRESS

Report Covering the Period:

From:

MM 10 DD 14 YYYY 2010

To:

MM 11 DD 22 YYYY 2010

	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)).....	94367.05	3047964.49
(b) Total Contribution Refunds (from Line 20(d)).....	1000.00	51580.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	93367.05	2996384.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	133087.52	3107573.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	800.00	8484.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	132287.52	3099089.37
8. Cash on Hand at Close of Reporting Period (from Line 27).....	690057.34	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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
MALONEY 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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>2</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date of general election)	M	M	1	1	D	D	0	2	Y	Y	Y	Y	2	0	1	0	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>3</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>2</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	3	Y	Y	Y	Y	2	0	1	0	M	M	1	1	D	D	2	2	Y	Y	Y	Y	2	0	1	0
M	M																																																	
1	1																																																	
D	D																																																	
0	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	3																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	2																																																	
Y	Y	Y	Y																																															
2	0	1	0																																															
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A)	41475.00	2055274.53	10650.00																																															
(ii) Unitemized	3142.05	96431.23	425.00																																															
(iii) Total of contributions from individuals	44617.05	2151705.76	11075.00																																															
(b) Political Party Committees	0.00	15335.04	0.00																																															
(c) Other Political Committees	49750.00	880923.69	9000.00																																															

**POST-ELECTION DETAILED
SUMMARY PAGE
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 * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
94367.05	3047964.49	20075.00
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)		
800.00	8484.25	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	40563.53	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
95167.05	3097012.27	20075.00

POST ELECTION DETAILED SUMMARY PAGE

Write or Type Committe Name

MALONEY 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)
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17. OPERATING EXPENDITURES

133087.52

3107573.62

27087.27

18. TRANSFER TO OTHER AUTHORIZED COMMITTEES

0.00

0.00

0.00

19. LOAN PAYMENTS

(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

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

1000.00

45080.00

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	6500.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))		
1000.00	51580.00	0.00
21. OTHER DISBURSEMENTS		
100000.00	324968.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
234087.52	3484121.62	27087.27

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))

93367.05	2996384.49	20075.00
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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)

132287.52	3099089.37	27087.27
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	828977.81
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	95167.05
25. SUBTOTAL(add Line 23 and Line 24)	924144.86
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	234087.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	690057.34

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

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

FOR LINE NUMBER: PAGE 7 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Salvatore J Barbera

Mailing Address 131 West Poplar Street

City State Zip Code
Floral Park NY 11001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Adwinston Corp. President

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

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

Transaction ID: SA11AI.30554

Amount of Each Receipt this Period
1000.00

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

Mailing Address 8233 Seminole St.

City State Zip Code
Philadelphia PA 19118

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Berger & Montage Attorney

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

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

Transaction ID: SA11AI.30616

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Darren Check

Mailing Address 260 King Of Prussia Road

City State Zip Code
Radnor PA 19087

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Barroway Topaz Kessler Me-
ltzer Partner

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

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

Transaction ID: SA11AI.30613

Amount of Each Receipt this Period
2200.00

SUBTOTAL of Receipts This Page (optional) 4700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cohen Milstein Seller & Toll Pllc
Mailing Address 1100 New York Ave. NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 1 0
Transaction ID: SA11AI.30745
 Amount of Each Receipt this Period
 1800.00

B. Full Name (Last, First, Middle Initial)
Steven J Toll
Mailing Address 1100 New York N.W.

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Milstein Sellers Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 1 0
Transaction ID: SA11AI.30745.0
 Amount of Each Receipt this Period
 450.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Daniel S Sommers
Mailing Address 1100 New York Avenue NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Cohen Milstein Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 1 0
Transaction ID: SA11AI.30745.1
 Amount of Each Receipt this Period
 450.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 1800.00

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 9 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Daniel A. Small

Mailing Address 1100 New York Avenue NW

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Milstein Sellers Partner

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

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11AI.30745.2

Amount of Each Receipt this Period
450.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Herbert E Milstein

Mailing Address 1100 New York Avenue NW

City State Zip Code
Washington DE 20005

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

Name of Employer Occupation
Milstein Sellers Partner

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

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: SA11AI.30745.3

Amount of Each Receipt this Period
450.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Felix De Vito

Mailing Address 25-71 57th Street

City State Zip Code
Long Island City NY 11103-1108

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

Name of Employer Occupation
Devito Bros. Interprises Owner

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

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11AI.30552

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **50.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Maria Domenikos

Mailing Address 4211 Clearview Expy

City State Zip Code
Bayside NY 11361

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

Name of Employer Self-Employed
Occupation Day Care

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30834

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Henry H Elghanayan

Mailing Address 666 5th Avenue

City State Zip Code
New York NY 10113

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

Name of Employer Rockrose
Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30627

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Dean Facatselis

Mailing Address 13 Lloyhaven Drive

City State Zip Code
Huntington NY 11743

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

Name of Employer Self-Employed
Occupation Businessman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30869

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Myrna Felder

Mailing Address 60 Sutton Place South

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Myrna Felder , ESQ 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 4 / 2 0 1 0

Transaction ID: SA11AI.30836

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Fidelma Fitzpatrick

Mailing Address 66 Lincoln Pkwy

City State Zip Code
Buffalo NY 14222-1012

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

Name of Employer Occupation
Mothey Rive LLC 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 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.30547

Amount of Each Receipt this Period
600.00

C.

Full Name (Last, First, Middle Initial)
Forty Seventh Fifth Company LL

Mailing Address 580 Fifth Avenue

City State Zip Code
New York NY 10036

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

Name of Employer Occupation

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

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

Transaction ID: SA11AI.30862

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **3100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

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

Mailing Address 240 East 78th Street

City State Zip Code
New York NY 10021

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

Name of Employer Retired Occupation 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 7 / 2 0 1 0

Transaction ID: SA11AI.30611

Amount of Each Receipt this Period
1000.00

2000.00

B. Full Name (Last, First, Middle Initial)
Anne P Jameson

Mailing Address 485 Lexington Avenue

City State Zip Code
New York NY 10017

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

Name of Employer N/A Occupation Homemaker

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.30497

Amount of Each Receipt this Period
2400.00

2400.00

C. Full Name (Last, First, Middle Initial)
Rita Kwiat

Mailing Address 15 Cypress Avenue

City State Zip Code
Great neck NY 11024

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

Name of Employer Self-Employed Occupation Jewler

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

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

Transaction ID: SA11AI.30817

Amount of Each Receipt this Period
250.00

250.00

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 13 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Labaton Sucharow LLP

Mailing Address 140 Broadway

City State Zip Code
New York NY 10005

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 03 / 2010
Transaction ID: SA11AI.30795
Amount of Each Receipt this Period: 2200.00

B. Full Name (Last, First, Middle Initial)
Anne Marie Levitt

Mailing Address 10 East 82nd Street

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
C.S. Kansas City Corp. Real Estate

Receipt For: 2012
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11AI.30861
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Lief, Cabraser, Heimann & Berstein, LLP

Mailing Address 275 Battery Street

City State Zip Code
San Francisco CA 94111

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11AI.30500
Amount of Each Receipt this Period: 1400.00

SUBTOTAL of Receipts This Page (optional) ► 4600.00

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert F Nelson

Mailing Address 26641 Laurel Crest Dr

City Laguna Hills State CA Zip Code 92653

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

Name of Employer Experian Corp Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11AI.30500.6
 Amount of Each Receipt this Period: 102.90

[MEMO ITEM]

Amount of Each Receipt this Period: 602.90

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

Mailing Address 7Mason Drive

City Manhasset State NY Zip Code 11030

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

Name of Employer DBA Baldwin Express Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11AI.30500.11
 Amount of Each Receipt this Period: 81.20

[MEMO ITEM]

Amount of Each Receipt this Period: 281.20

C. Full Name (Last, First, Middle Initial)
Lawrence Litchfield

Mailing Address 162 East 55th St

City New York State NY Zip Code 10022

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 24 / 2010
Transaction ID: SA11AI.30859
 Amount of Each Receipt this Period: 75.00

Amount of Each Receipt this Period: 225.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joyce F. Menschel
Mailing Address 920 Fifth Avenue
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 01 / 2010
Transaction ID: SA11AI.30752
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Donald A Migliori
Mailing Address 681 Post Road
City Wakefield State RI Zip Code 02879
FEC ID number of contributing federal political committee. **C**
Name of Employer Montley Rice LLC Occupation Attorney
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 400.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI.30542
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Milberg LLP
Mailing Address One Pennsylvania Plaza
City New York State NY Zip Code 10119
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 400.00
Date of Receipt 11 / 03 / 2010
Transaction ID: SA11AI.30797
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 1800.00
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 16 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ingrid L Moll

Mailing Address 9 Holbrook RD

City State Zip Code
West Hartford CO 06107

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

Name of Employer Occupation
Motley Rice LLC Attorney

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

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

Transaction ID: SA11AI.30549

Amount of Each Receipt this Period
600.00

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

Mailing Address 666 Fifth Avenue

City State Zip Code
New York NY 10103

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

Name of Employer Occupation
N/A Homemaker

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

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

Transaction ID: SA11AI.30630

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Eliot Nolen

Mailing Address 1120 Fifth Avenue

City State Zip Code
New York NY 10128

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
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.30753

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pomerantz Haudex, Grossman & Gross LLP

Mailing Address 100 Park Avenue

City State Zip Code
New York NY 10017

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30875

Amount of Each Receipt this Period
400.00

400.00

B. Full Name (Last, First, Middle Initial)
Connie Galvez Quianbao

Mailing Address 48-06 Douglaston Parkway

City State Zip Code
Littl Neck NY 11362

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

Name of Employer Occupation
Self-Employed Dentist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30636

Amount of Each Receipt this Period
1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
Rosen Rosenberg

Mailing Address 711 Third Avenue

City State Zip Code
New York NY 10017

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

Name of Employer Occupation
Cassin, Cassin LLP Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: SA11AI.30842

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1900.00**

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 18 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) James J. Ross		Date of Receipt
	Mailing Address 770 Park Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10021
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30754
Name of Employer Becker Ross		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Elizabeth Rudolf		Date of Receipt
	Mailing Address 8255 West Mercer Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Mervcer Island	WA	98040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30779
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			Earmarked-Emily's List

C.	Full Name (Last, First, Middle Initial) Stephen M. Ryan		Date of Receipt
	Mailing Address 8920 Edgewood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Gaithersburg	MD	20877
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30484
Name of Employer Mc Dermott Will & Emery		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 4400.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3650.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 20 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen C. Swanson
Mailing Address 65 East 92nd St.
City State Zip Code
New York NY 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Investor
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11AI.30553
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ann G. Tenenbaum
Mailing Address 322 East 57th Street
City State Zip Code
New York NY 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 1 0
Transaction ID: SA11AI.30755
Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms Diane N. Weiss
Mailing Address 3180 South Ocean Drive #1103
City State Zip Code
Hallandale FL 33009
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Philanthropist
Receipt For: 2012 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0
Transaction ID: SA11AI.30824
Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► 3500.00
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 / 63
	(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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ms Diane N. Weiss		Date of Receipt
	Mailing Address 3180 South Ocean Drive #1103		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Hallandale	FL	33009
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30825
Name of Employer None		Occupation Philanthropist	Amount of Each Receipt this Period
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00

B.	Full Name (Last, First, Middle Initial) Shelby B. White		Date of Receipt
	Mailing Address 1 Sutton Place South		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	City	State	Zip Code
	New York	NY	10022
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.30751
Name of Employer Self-Employed		Occupation Journalist	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3400.00
TOTAL This Period (last page this line number only)	<input type="text"/> 41475.00

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

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

FOR LINE NUMBER: PAGE 22 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AARON'S, INC. POLITICAL ACTION COMMITTEE

Mailing Address 309 East Paces Ferry Road, N.E.

City Atlanta State GA Zip Code 30305

FEC ID number of contributing federal political committee. **C** C00459933

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11C.30557
Amount of Each Receipt this Period: 4000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1350 I Street NW Suite 880

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11C.30571
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES, AFL-CIO (D.C.)

Mailing Address 1625 L STREET, N.W.

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000120

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11C.30643
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 VERMONT AVENUE NW
12TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

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

Transaction ID: SA11C.30638
 Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION AFL-CIO

Mailing Address 1300 L ST N W

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C70003322

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

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

Transaction ID: SA11C.30563
 Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1400 K Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00373696

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	0	/	2	7	/	2	0	1	0

Transaction ID: SA11C.30623
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)

Mailing Address 2901 Telestar Court 4th Floor

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
11 / 03 / 2010

Transaction ID: SA11C.30744

Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF PROGRESSIVE RENTAL ORGANIZATIONS POLITICAL ACTION COMMITTEE

Mailing Address 1504 Robin Hood Trail
HOUSTON BLDG #220

City Austin State TX Zip Code 78703

FEC ID number of contributing federal political committee. **C** C00166223

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11C.30559

Amount of Each Receipt this Period: 4000.00

C. Full Name (Last, First, Middle Initial)
AXA EQUITABLE LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE (AXA EQUITABLE PAC)

Mailing Address 1290 Avenue of the Americas
4th Floor

City New York State NY Zip Code 10104

FEC ID number of contributing federal political committee. **C** C00161901

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
10 / 22 / 2010

Transaction ID: SA11C.30561

Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARCLAYS GROUP US INC. POLITICAL ACTION COMMITTEE

Mailing Address 1501 K Street NW
Suite 500

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00448852

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11C.30639
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Community Financial Servise of America

Mailing Address 515 King Street

City Alexandra State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00432534

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 29 / 2010
Transaction ID: SA11C.30642
 Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE

Mailing Address 701 Pennsylvania Avenue NW
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 22 / 2010
Transaction ID: SA11C.30485
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE
 Mailing Address 430 SOUTH CAPITOL STREET
 City WASHINGTON State DC Zip Code 20003
 Date of Receipt 10 / 22 / 2010
Transaction ID: SA11C.30925
 Amount of Each Receipt this Period 2500.00
 In-kind - targeting data
 FEC ID number of contributing federal political committee. **C** C00000935
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2725.55

B. Full Name (Last, First, Middle Initial)
FEDERAL MANAGERS' ASSOCIATION POLITICAL ACTION COMMITTEE
 Mailing Address 1641 PRINCE STREET
 City ALEXANDRIA State VA Zip Code 22314
 Date of Receipt 10 / 22 / 2010
Transaction ID: SA11C.30551
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C** C00164848
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. Full Name (Last, First, Middle Initial)
FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)
 Mailing Address 82 Devonshire Street N5A
 City Boston State MA Zip Code 02109
 Date of Receipt 10 / 27 / 2010
Transaction ID: SA11C.30607
 Amount of Each Receipt this Period 2000.00
 FEC ID number of contributing federal political committee. **C** C00380550
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

SUBTOTAL of Receipts This Page (optional) ► 4750.00
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 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GRANITE CONSTRUCTION INC. EMPLOYEE PAC - GRANITEPAC
 Mailing Address 555 Capitol Mall, Suite 1425
 City State Zip Code
 Sacramento CA 95814
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 5 / 2 0 1 0
Transaction ID: SA11C.30815
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C** C00337394
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION
 Mailing Address 17 Battery Place
 City State Zip Code
 New York NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 9 / 2 0 1 0
Transaction ID: SA11C.30632
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C** C00158576
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2500.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL SECURITIES EXCHANGE PAC
 Mailing Address 60 Broad Street
 26th Floor
 City State Zip Code
 New York NY 10004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 2 / 2 0 1 0
Transaction ID: SA11C.30567
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C** C00382226
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

SUBTOTAL of Receipts This Page (optional) ► **6500.00**
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 28 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARRIOTT INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE

Mailing Address 10400 Fernwood Road

City State Zip Code
Bethesda MD 20817

FEC ID number of contributing federal political committee. **C** C00284810

Name of Employer Occupation

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	2	/	2	0	1	0

Transaction ID: SA11C.30569

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
RADIAN GROUP EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1601 MARKET STREET

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00302166

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11C.30813

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
RENT-A-CENTER, INC. GOOD GOVERNMENT POLITICAL ACTION COMMITTEE

Mailing Address 5501 Headquarters Drive
Floor 3

City State Zip Code
Plano TX 75024

FEC ID number of contributing federal political committee. **C** C00410324

Name of Employer Occupation

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	2	/	2	0	1	0

Transaction ID: SA11C.30556

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional) ►

8000.00

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

49750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 63
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address PO Box 260

City State Zip Code
Newtonville MA 02460

FEC ID number of contributing federal political committee. **C** C00128868

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

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

Transaction ID: SA14.30909

Amount of Each Receipt this Period
400.00

Exceeds

B. Full Name (Last, First, Middle Initial)
MELISSA BEAN FOR CONGRESS

Mailing Address PO BOX 3068

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

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

Transaction ID: SA14.30932

Amount of Each Receipt this Period
400.00

Exceeds limit

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	800.00

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 / 63

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) American Express Co. Mailing Address P.O.Box 2855 City New York State NY Zip Code 10116-2855 Purpose of Disbursement Amex Collection 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) ▼	Transaction ID: SB17.30729 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 4.95 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) American Express Co. Mailing Address P.O.Box 2855 City New York State NY Zip Code 10116-2855 Purpose of Disbursement Amex Collection 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) ▼	Transaction ID: SB17.30949 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 4.95 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) American Express Co. Mailing Address P.O.Box 2855 City New York State NY Zip Code 10116-2855 Purpose of Disbursement see split 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) ▼	Transaction ID: SB17.30679 Date of Disbursement 11 / 08 / 2010 Amount of Each Disbursement this Period 5414.97 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5424.87

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Yura Co. On Madison

Mailing Address 1292 Madison Ave.

City State Zip Code
New York NY 10128

Purpose of Disbursement
Meeting cost
Candidate Name

003
Category/
Type

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

Transaction ID: SB17.30679.1
Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

57.16

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
The Pizza Pub

Mailing Address 294 3rd St.

City State Zip Code
New York NY 10010

Purpose of Disbursement
Volunteers -Food
Candidate Name

007
Category/
Type

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

Transaction ID: SB17.30679.2
Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

178.75

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
The Pizza Pub

Mailing Address 294 3rd St.

City State Zip Code
New York NY 10010

Purpose of Disbursement
Volunteer Food
Candidate Name

007
Category/
Type

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

Transaction ID: SB17.30679.3
Date of Disbursement

10 / 21 / 2010

Amount of Each Disbursement this Period

188.75

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Gotham Pizza

Mailing Address 1667 1st Avenue

City New York State NY Zip Code 10010

Purpose of Disbursement

Food Volunteers

Candidate Name

007
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30679.6
Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

102.65

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Federal Express Co.

Mailing Address 1475 Boettler Road

City Uniontown State OH Zip Code 44685

Purpose of Disbursement

Mail

Candidate Name

003
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30679.7
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

293.64

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
The Pizza Pub

Mailing Address 294 3rd St.

City New York State NY Zip Code 10010

Purpose of Disbursement

Food for Workers

Candidate Name

007
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30679.8
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

188.75

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The Pizza Pub Mailing Address 294 3rd St. City New York State NY Zip Code 10010 Purpose of Disbursement Food- Volunteers 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) ▼	Transaction ID: SB17.30679.10 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 188.75 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) The Pizza Pub Mailing Address 294 3rd St. City New York State NY Zip Code 10010 Purpose of Disbursement Food For Volunteers 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) ▼	Transaction ID: SB17.30679.11 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 78.50 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) House Gift Shop Mailing Address 529 14th st nw City Washignton State DC Zip Code 20045 Purpose of Disbursement Gifts for Donors 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) ▼	Transaction ID: SB17.30679.12 Date of Disbursement 10 / 26 / 2010 Amount of Each Disbursement this Period 127.08 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
NYC Taxirifone

Mailing Address 3615 13th St.

City L.I. C. State NY Zip Code 11230

Purpose of Disbursement
Transportation

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.14
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

41.75

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
NYC Taxirifone

Mailing Address 3615 13th St.

City L.I. C. State NY Zip Code 11230

Purpose of Disbursement
Transportation

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.16
Date of Disbursement

10 / 20 / 2010

Amount of Each Disbursement this Period

11.80

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Best Buy Co,

Mailing Address 1280 Lexington Avenue

City New York State NY Zip Code 10028

Purpose of Disbursement
2 cameras for Campaign Office

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.17
Date of Disbursement

10 / 16 / 2010

Amount of Each Disbursement this Period

443.35

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Amtrak Co. Mailing Address 60 Massachusetts Avenue NE City Washington State DC Zip Code 20002-4225 Purpose of Disbursement Transportaion 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) ▼	Transaction ID: SB17.30679.20 Date of Disbursement 10 / 21 / 2010 Amount of Each Disbursement this Period 180.00 [MEMO ITEM]	
B.	Full Name (Last, First, Middle Initial) The Hyatt Hotel of NYC Mailing Address 109 East 42nd Street City New York State NY Zip Code 10009 Purpose of Disbursement Victory Primary Party Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.30679.21 Date of Disbursement 10 / 21 / 2010 Amount of Each Disbursement this Period 1342.80 [MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) BMC Metro PCS Mailing Address P.O. Box 5119 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Volunteers Phone 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) ▼	Transaction ID: SB17.30679.24 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 247.00 [MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
OK Market

Mailing Address 1234 Madison Avenue

City New York State NY Zip Code 10128

Purpose of Disbursement
Cost of Meeting @ Office

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.25
Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

56.36

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Dunkin Donuts

Mailing Address 3043 Steinway Street

City Astoria State NY Zip Code 11103

Purpose of Disbursement
Coffee & Bagels-Campaign Workers

Candidate Name

007
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.28
Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

504.59

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Reliable Locksmith

Mailing Address 1592 3rd Avenue

City New York State NY Zip Code 10128

Purpose of Disbursement
Locksmith-Keys

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30679.30
Date of Disbursement

10 / 16 / 2010

Amount of Each Disbursement this Period

112.74

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Corner Cafe and Bakery <hr/> Mailing Address 1651 Third Avenue <hr/> City New York State NY Zip Code 10128 <hr/> Purpose of Disbursement Meeting- Food Candidate Name <hr/> 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) ▼	Transaction ID: SB17.30679.31 Date of Disbursement 11 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 51.44 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Pascalou Restaurant <hr/> Mailing Address 1308 Madison Avenue <hr/> City New York State NY Zip Code 10128 <hr/> Purpose of Disbursement Mtg. Cost Candidate Name <hr/> 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) ▼	Transaction ID: SB17.30679.32 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 91.49 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Ginos Pizza <hr/> Mailing Address 4319 Broadway <hr/> City New York State NY Zip Code 11103 <hr/> Purpose of Disbursement Volunteers - Food Candidate Name <hr/> 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) ▼	Transaction ID: SB17.30679.33 Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 77.85 <hr/> [MEMO ITEM]

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Lori Amor

Transaction ID: SB17.30903
Date of Disbursement

Mailing Address 21-38 45th Street

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

City State Zip Code
New York NY 11105

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel expenses

002
Category/ Type

236.85

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
James Ansorge

Transaction ID: SB17.30904
Date of Disbursement

Mailing Address 112 East 83rd Street

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

City State Zip Code
New York NY 10028

Amount of Each Disbursement this Period

Purpose of Disbursement
Travel expenses

002
Category/ Type

431.55

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB17.30677
Date of Disbursement

Mailing Address PO Box 1575

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

City State Zip Code
Plattsburgh NY 12901

Amount of Each Disbursement this Period

Purpose of Disbursement
Donation

012
Category/ Type

2000.00

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2668.40

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Carl Silverberg Association <hr/> Mailing Address 820 North Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement DC Financial Director Candidate Name 003 Category/Type <hr/> Office Sought: <input 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: District:	Transaction ID: SB17.30676 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 10000.00
B.	Full Name (Last, First, Middle Initial) Chase Bank <hr/> Mailing Address P.O. Box 15836 <hr/> City Willmington State DE Zip Code 19886-5836 <hr/> Purpose of Disbursement Fee Candidate Name 001 Category/Type <hr/> Office Sought: <input 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: District:	Transaction ID: SB17.30734 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 10.00
C.	Full Name (Last, First, Middle Initial) Chase Bank <hr/> Mailing Address P.O. Box 15836 <hr/> City Willmington State DE Zip Code 19886-5836 <hr/> Purpose of Disbursement Fee Candidate Name 001 Category/Type <hr/> Office Sought: <input 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: District:	Transaction ID: SB17.30737 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 2.80

SUBTOTAL of Disbursements This Page (optional) ▶

10012.80

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Darrison Barrett & Association LLC

Mailing Address 120 Broadway

City New York State NY Zip Code 10271

Purpose of Disbursement
Fundraiser Consultant

Candidate Name

003
Category/
Type

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

Transaction ID: SB17.30897
Date of Disbursement

11 / 08 / 2010

Amount of Each Disbursement this Period

6609.71

B. Full Name (Last, First, Middle Initial)
Democratic Assembly County Committe

Mailing Address 250 Broadway

City New York State NY Zip Code 10007

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

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

Transaction ID: SB17.30668
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

20000.00

C. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
In-kind - targeting data

Candidate Name

Category/
Type

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

Transaction ID: SB17.30926
Date of Disbursement

10 / 22 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

29109.71

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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Fee Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30772 Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 1.33 Category/Type: 003
B. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Fee Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30758 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 0.32 Category/Type: 003
C. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Service Fee Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30808 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 0.57 Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) ▶

2.22

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Earmarked Emily's List Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30801 Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 50.00 Category/Type
B. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Service fee Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30802 Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 2.00 Category/Type 003
C. Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Service Fee Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30812 Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 4.00 Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶

56.00

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Mark Feinberg</p> <p>Mailing Address 15-01 Broadway</p> <p>City Fairlawn State NJ Zip Code 07410</p> <p>Purpose of Disbursement Account 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>Transaction ID: SB17.30667 Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 650.00</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Anne Fenton</p> <p>Mailing Address 394 Court Street</p> <p>City New York State NJ Zip Code 11231</p> <p>Purpose of Disbursement Reimbursement-Travel 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>Transaction ID: SB17.30670 Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 325.22</p> <p>002 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sarah Gitlin</p> <p>Mailing Address 27 East 93rd Street</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Campaign Helper 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>Transaction ID: SB17.30945 Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1475.22

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Global Strategy Service Mailing Address 895 Broadway City New York State NY Zip Code 10003 Purpose of Disbursement Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30887 Date of Disbursement 11 / 08 / 2010 Amount of Each Disbursement this Period 250.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Jewish Post Mailing Address 70-16 18th Avenue City Brooklyn State NY Zip Code 11204 Purpose of Disbursement Sept. Ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.30686 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 200.00 Category/Type 004
C.	Full Name (Last, First, Middle Initial) Jewish World Mailing Address 1525 Central Avenue City Far Rockaway State NY Zip Code 11691 Purpose of Disbursement Ad Candidate Name Office Sought: <input 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: District:	Transaction ID: SB17.30889 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 640.00 Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶

1090.00

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Donna Kobierecki

Transaction ID: SB17.30914
Date of Disbursement

Mailing Address 197 East 7th St

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

City State Zip Code
New York NY 10009

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
Office Maintenance

Category/ Type

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Lake Research Partners

Transaction ID: SB17.30672
Date of Disbursement

Mailing Address 1726 M Street NW Suite 1100

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

City State Zip Code
Washington DC 20036

Amount of Each Disbursement this Period

146.00

Purpose of Disbursement
Travel expenses

002 Category/ Type

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Liberty Concepts

Transaction ID: SB17.30674
Date of Disbursement

Mailing Address 119 Braintree Street

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

City State Zip Code
Allston MD 02134

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Website

001 Category/ Type

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

1046.00

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)

PAGE 47 / 63

<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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Group Inc. Manhattan Newspaper <hr/> Mailing Address 63 West 38th Street <hr/> City New York State NY Zip Code 10018 <hr/> Purpose of Disbursement Advertising 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: SB17.30682 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 7250.00
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) McManus Midtown Democratic Assoc. <hr/> Mailing Address 345 West 44th Street <hr/> City New York State NY Zip Code 10036 <hr/> Purpose of Disbursement Donation 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: SB17.30660 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00
	Category/ Type 012
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Melissa Mendez <hr/> Mailing Address 25-38 100th Street <hr/> City East Elmhurst State NY Zip Code 11369 <hr/> Purpose of Disbursement reimbursements-Travel 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: SB17.30680 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 735.06
	Category/ Type 002
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8185.06

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Metro Monitor

Mailing Address 612 37th Street

City Birmingham State AL Zip Code 35222

Purpose of Disbursement
News

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30673
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

195.00

B.

Full Name (Last, First, Middle Initial)
Milbert Group, LLC

Mailing Address PO Box 1404

City LaPorte, State CO Zip Code 80535

Purpose of Disbursement
e-mails

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30671
Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)
NATIONAL WOMEN'S POLITICAL CAUCUS CAMPAIGN SUPPORT COMMITTEE

Mailing Address PO Box 50467
Suite 310

City WASHINGTON State DC Zip Code 20091

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30664
Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1495.00

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)

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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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) New York Letter Carriers Branch #36 Mailing Address 347 West 41 Street City New York State NY Zip Code 10036 Purpose of Disbursement Tickets for Annual Event 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) ▼	Transaction ID: SB17.30657 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0 Amount of Each Disbursement this Period 210.00 012 Category/ Type
B.	Full Name (Last, First, Middle Initial) NGP Software Inc. Mailing Address 5039 Connecticut Ave. NW City Washigton State DC Zip Code 20008-2056 Purpose of Disbursement Quarterly Fee 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) ▼	Transaction ID: SB17.30685 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 2100.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Nina Nievens Mailing Address 26 East 93rd Street City New York State NY Zip Code 10128 Purpose of Disbursement Rent 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) ▼	Transaction ID: SB17.30886 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0 Amount of Each Disbursement this Period 6236.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	8546.00
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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Paychex Payroll	Transaction ID: SB17.30733 Date of Disbursement																			
	Mailing Address 135 Chestnut Ridge Road	<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>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	1	0												
	City New Jersey State NJ Zip Code 07645	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Payroll	<table border="1"><tr><td>24220.29</td></tr></table>	24220.29																		
24220.29																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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.	Full Name (Last, First, Middle Initial) Melissa Mendez	Transaction ID: SB17.30733.0 Date of Disbursement																			
	Mailing Address 25-38 100th 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>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>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	1	0												
	City East Elmhurst State NY Zip Code 11369	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>3041.44</td></tr></table>	3041.44																		
3041.44																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Matt Tepper	Transaction ID: SB17.30733.1 Date of Disbursement																			
	Mailing Address 27 East 13th Street #5P	<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>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	1	0												
	City New York State NM Zip Code 10003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Campaign Manager	<table border="1"><tr><td>5164.88</td></tr></table>	5164.88																		
5164.88																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	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) ▼																			

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

24220.29

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Benjamin Tyson

Mailing Address 803 Ithaca Drive

City Boulder State CO Zip Code 80305

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30733.2
Date of Disbursement

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

Amount of Each Disbursement this Period

1866.32

001
Category/
Type

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Alexandria Agins

Mailing Address 32-42 160th St.

City Flushing State NY Zip Code 11358

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30733.3
Date of Disbursement

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

Amount of Each Disbursement this Period

3047.94

001
Category/
Type

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Lori Amor

Mailing Address 21-38 45th Street

City New York State NY Zip Code 11105

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB17.30733.4
Date of Disbursement

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

Amount of Each Disbursement this Period

1664.45

001
Category/
Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) James Ansgore	Transaction ID: SB17.30733.5
	Mailing Address 112 East 83rd Street	Date of Disbursement 10 / 28 / 2010
	City New York State NY Zip Code 10028	Amount of Each Disbursement this Period 2877.94
	Purpose of Disbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input 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: District:	

B.	Full Name (Last, First, Middle Initial) Garner Shelby	Transaction ID: SB17.30733.6
	Mailing Address 1510 Albermarle Road	Date of Disbursement 10 / 28 / 2010
	City Brooklyn State NY Zip Code 11226	Amount of Each Disbursement this Period 1718.09
	Purpose of Disbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input 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: District:	

C.	Full Name (Last, First, Middle Initial) Alex Anfang	Transaction ID: SB17.30733.7
	Mailing Address 145 fourth Avenue	Date of Disbursement 10 / 28 / 2010
	City New York State NY Zip Code 10003	Amount of Each Disbursement this Period 3047.94
	Purpose of Disbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
E.R. Allegro

Mailing Address 750 Columbus Avenue

City State Zip Code
New York NY 10025

Purpose of Disbursement

Candidate Name

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

Category/
Type

Transaction ID: SB17.30733.8
Date of Disbursement

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

Amount of Each Disbursement this Period

1791.28

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Paychex TPS Taxes

Mailing Address 135 Chestnut Ridge Road

City State Zip Code
New Jersey NJ 07645

Purpose of Disbursement
Taxex

Candidate Name

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

001
Category/
Type

Transaction ID: SB17.30736
Date of Disbursement

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

Amount of Each Disbursement this Period

12448.24

C.

Full Name (Last, First, Middle Initial)
Brice Peyre

Mailing Address 30 east 96th Street

City State Zip Code
New York NY 10028

Purpose of Disbursement
Consultant

Candidate Name

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

001
Category/
Type

Transaction ID: SB17.30669
Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

13448.24

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)
MALONEY FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Queens Chronicle</p> <p>Mailing Address 62-33 Woodhaven Blvd.</p> <p>City Rego Park State NY Zip Code 11374</p> <p>Purpose of Disbursement Ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30684</p> <p>Date of Disbursement</p> <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> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">230.00</td> </tr> </table> <p>004 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1	0	230.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	1	/	2	0	1	0													
230.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Queens Courier</p> <p>Mailing Address 3815 Bell Blvd.</p> <p>City Flushing State NY Zip Code 11361</p> <p>Purpose of Disbursement Ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30900</p> <p>Date of Disbursement</p> <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> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">295.00</td> </tr> </table> <p>004 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	1	0	295.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	8	/	2	0	1	0													
295.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Queens Gazette</p> <p>Mailing Address 42-16 34th Avenue</p> <p>City Long Island City State NY Zip Code 11101</p> <p>Purpose of Disbursement ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30689</p> <p>Date of Disbursement</p> <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> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">155.00</td> </tr> </table> <p>004 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1	0	155.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	1	/	2	0	1	0													
155.00																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="font-weight: bold;">680.00</td> </tr> </table>	680.00
680.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td style="height: 20px;"></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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Queens Gazette

Mailing Address 42-16 34th Avenue

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Ad

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30896
Date of Disbursement

11 / 08 / 2010

Amount of Each Disbursement this Period

2950.00

B.

Full Name (Last, First, Middle Initial)
Queens Gazette

Mailing Address 42-16 34th Avenue

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Ad

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30908
Date of Disbursement

11 / 08 / 2010

Amount of Each Disbursement this Period

650.00

C.

Full Name (Last, First, Middle Initial)
Queens Gazette

Mailing Address 42-16 34th Avenue

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Ad

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.30907
Date of Disbursement

11 / 15 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6100.00

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Samuel Tilden Democratic Club

Transaction ID: SB17.30741
Date of Disbursement

Mailing Address 152 East 22nd Street

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

City State Zip Code
New York NY 10010

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Donation

012

Category/
Type

Candidate Name

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

B.

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

Transaction ID: SB17.30662
Date of Disbursement

Mailing Address 5 South Side Dr. #224

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

City State Zip Code
Clifton Park NY 12065

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Donation

012

Category/
Type

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)
Anastasia D. Skelton

Transaction ID: SB17.30735
Date of Disbursement

Mailing Address 4490 Merrick Road

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

City State Zip Code
Masspegua NY 11758

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
salary

001

Category/
Type

Candidate Name

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

SUBTOTAL of Disbursements This Page (optional)

2600.00

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Staples Co. Mailing Address P.O. Box 182378 City Columbus State OH Zip Code 43216 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: SB17.30659 Date of Disbursement 10 / 20 / 2010 Amount of Each Disbursement this Period 2500.88 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Suntrust Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Merchant Discount 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) ▼	Transaction ID: SB17.30730 Date of Disbursement 10 / 14 / 2010 Amount of Each Disbursement this Period 343.20 004 Category/ Type
C.	Full Name (Last, First, Middle Initial) Suntrust Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Merchant Interchg 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) ▼	Transaction ID: SB17.30731 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 257.90 003 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3101.98

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 58 / 63

<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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Suntrust Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740</p> <p>Purpose of Disbursement Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30732</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="49.40"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p>B. Full Name (Last, First, Middle Initial) The Dutch Kill Assoc</p> <p>Mailing Address 41-20 29th Street</p> <p>City L.I. C. State NY Zip Code 10016</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30891</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p> <p>Category/Type: <input type="text" value="011"/></p>
<p>C. Full Name (Last, First, Middle Initial) The National Herald</p> <p>Mailing Address 41-17 Crescent Avenue</p> <p>City Long Island State NY Zip Code 11101</p> <p>Purpose of Disbursement ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.30690</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p>Category/Type: <input type="text" value="004"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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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17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Wire

Transaction ID: SB17.30681
Date of Disbursement

Mailing Address 531 Main Street

/ /

City State Zip Code
Roosevelt Island NY 10044

Amount of Each Disbursement this Period

Purpose of Disbursement
Ad

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Time Warner Cable

Transaction ID: SB17.30683
Date of Disbursement

Mailing Address P.O. Box 9227

/ /

City State Zip Code
Uniondale NY 11555

Amount of Each Disbursement this Period

Purpose of Disbursement
Cable-Modem

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Town & Village

Transaction ID: SB17.30898
Date of Disbursement

Mailing Address 662 Main Street

/ /

City State Zip Code
New Rochelle NY 10801

Amount of Each Disbursement this Period

Purpose of Disbursement
Ad

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) United Community Civic Assoc. Mailing Address 22-32 81st Street City Jackson Heights State NY Zip Code 11370 Purpose of Disbursement Annual Christmas Party-Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.30665 Date of Disbursement 10 / 20 / 2010 Amount of Each Disbursement this Period 800.00 012 Category/ Type
B.	Full Name (Last, First, Middle Initial) Verizon Co. Mailing Address P.O. Box 15124 City Albany State NY Zip Code 12212-5124 Purpose of Disbursement Utility 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) ▼	Transaction ID: SB17.30675 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 156.91 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Verizon Co. Mailing Address P.O. Box 15124 City Albany State NY Zip Code 12212-5124 Purpose of Disbursement Phone 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) ▼	Transaction ID: SB17.30885 Date of Disbursement 11 / 08 / 2010 Amount of Each Disbursement this Period 259.79 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1216.70

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.30894
Date of Disbursement

Mailing Address P.O. Box 15124

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

City Albany State NY Zip Code 12212-5124

Amount of Each Disbursement this Period

Purpose of Disbursement
Phone

001
Category/ Type

284.13

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.30895
Date of Disbursement

Mailing Address P.O. Box 15124

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

City Albany State NY Zip Code 12212-5124

Amount of Each Disbursement this Period

Purpose of Disbursement
Mobile

001
Category/ Type

112.73

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Working Families Party

Transaction ID: SB17.30654
Date of Disbursement

Mailing Address 88 Third Avenue

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

City Brooklyn State NY Zip Code 11217

Amount of Each Disbursement this Period

Purpose of Disbursement
Donation

012
Category/ Type

10000.00

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

10396.86

TOTAL This Period (last page this line number only)

132288.98

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Edmund F. Brown

Mailing Address 205 3rd Avenue

City State Zip Code
New York NY 10003

Purpose of Disbursement
Bank Returned

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB20A.30833

Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL 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)

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<input 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 checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Transaction ID: SB21.30658

Date of Disbursement

Mailing Address 430 SOUTH CAPITOL STREET

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

City State Zip Code
WASHINGTON DC 20003

Amount of Each Disbursement this Period

100000.00

Purpose of Disbursement
Unlimited Transfer To national Party

012
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

100000.00

TOTAL This Period (last page this line number only)

100000.00