

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> Nita Lowey for Congress			
ADDRESS (number and street) PO Box 271			
<b>CITY, STATE, and ZIP CODE</b> White Plains NY 10605			
<b>2. NAME OF CANDIDATE</b> Nita M Lowey	<b>3. OFFICE SOUGHT</b> (State and District) House NY 17		<b>4. FEC IDENTIFICATION NUMBER</b> C00219881
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Name of Employer American Federation Of State County & Municipal Em  1625 L Street NW  Washington DC 20036		Date (month, day, year) 10/27/2012	Amount 1000.00
Transaction ID : C19666093		Occupation	
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Name of Employer American Hospital Association Political Action Com  325 Seventh Street NW  Washington DC 20004		Date (month, day, year) 10/26/2012	Amount 1000.00
Transaction ID : C19662743		Occupation	
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Name of Employer Julia Fishelson  1630 Burbank Road  Wooster OH 44691		Date (month, day, year) 10/26/2012	Amount 2500.00
Transaction ID : C19665730		Occupation Retired	
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Name of Employer Ms. Jessica Goldsmith  25 Windmill Road  Armonk NY 10504		Date (month, day, year) 10/26/2012	Amount 2500.00
Transaction ID : C19665277		Occupation Attorney	
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Name of Employer Barbara Goldstein  2 Stratton Road  Purchase NY 10577		Date (month, day, year) 10/26/2012	Amount 2500.00
Transaction ID : C19665284		Occupation Homemaker	
<b>SIGNATURE (optional)</b> Richard Melnikoff		<b>DATE</b> 10/28/2012	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
<i>[Electronically Filed]</i>			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

**FEC FORM 6**  
(Revised 07/2011)

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<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Lawrence Goldstein  2 Stratton Road  Purchase NY 10577	Name of Employer Self Employed  <b>Transaction ID : C19665286</b> Occupation Investor	Date (month, day, year) 10/26/2012	Amount 2500.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Mrs. Barbara Israel  21 East 79th Street  New York NY 10021	Name of Employer Barbara Israel Garden Antiques  <b>Transaction ID : C19662917</b> Occupation Antique Dealer	Date (month, day, year) 10/26/2012	Amount 2500.00
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Joint Action Committee for Political Affairs  PO BOX 105  Highland Park IL 60035	Name of Employer  <b>Transaction ID : C19665731</b> Occupation	Date (month, day, year) 10/26/2012	Amount 1000.00
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Heidi Rieger  800 Old Post Rd.  Bedford NY 10506	Name of Employer Self  <b>Transaction ID : C19665258</b> Occupation Social Worker	Date (month, day, year) 10/26/2012	Amount 2500.00
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b> Richard Rieger  800 Old Post Rd.  Bedford NY 10506	Name of Employer Kingdon Capital  <b>Transaction ID : C19665252</b> Occupation Investor	Date (month, day, year) 10/26/2012	Amount 2500.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Lucille Werlinich  18 Ponds Lane  Purchase NY 10577	N/A  <b>Transaction ID : C19665273</b> Occupation Retired	10/26/2012	2000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Harriet Blumencranz Willensky  PO Box 410  Goldens Bridge NY 10526	Name of Employer N/A  <b>Transaction ID : C19665249</b> Occupation Retired	Date (month, day, year) 10/26/2012	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount