

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Nita Lowey for Congress

ADDRESS (number and street)

PO Box 271

Check if different than previously reported. (ACC)

White Plains

NY

10605

2. FEC IDENTIFICATION NUMBER ▼

C C00219881

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2012

through

M M / D D / Y Y Y Y  
09 / 30 / 2012

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 Richard Melnikoff

Signature of Treasurer

Richard Melnikoff

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 15 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Nita Lowey for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	365771.26	1994627.12
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	365771.26	1994127.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	446185.25	1323738.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	21482.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	446185.25	1302256.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1048364.30	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Nita Lowey for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	237815.00	1613005.00
(ii) Unitemized.....	30573.87	78301.87
(iii) TOTAL of contributions from individuals ▶	268388.87	1691306.87
(b) Political Party Committees.....	7.39	145.25
(c) Other Political Committees (such as PACs).....	97375.00	303175.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	365771.26	1994627.12
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	21482.06
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	313.49	17726.46
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	366084.75	2033835.64

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	446185.25	1323738.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS .....	217528.00	559293.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	663713.25	1883531.73

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1345992.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	366084.75
25. SUBTOTAL (add Line 23 and Line 24).....	1712077.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	663713.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1048364.30

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 45 Birchall Drive

City Scarsdale State NY Zip Code 10583

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

Name of Employer Information Requested Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19566142**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 47 Tranquility Rd

City Suffern State NY Zip Code 10901

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2012

**Transaction ID : C19529524**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Madelyn Adamson**

Mailing Address 1020 Park Avenue #20B

City New York State NY Zip Code 10028

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

Name of Employer Information Requested Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19578770**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Mark Adelson</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012
Mailing Address 15 Lafayette Dr		<b>Transaction ID : C19593389</b>
City New City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Tranquility Spa	Occupation Owner	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) <b>Mary Adler</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012
Mailing Address 2 Brookwood Lane		<b>Transaction ID : C19588833</b>
City New City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Rand Commercial	Occupation Real Estate	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Paul Adler</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012
Mailing Address 2 Brookwood Lane		<b>Transaction ID : C19598164</b>
City New City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Prudential Rand Commercial Services	Occupation Real Estate	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shahara Ahmad-Llewellyn**

Mailing Address 300 Central Park West #17D

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19608409**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tracy Albers**

Mailing Address 1999 Harrison St.  
Suite 655

City State Zip Code  
Oakland CA 94761

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

Name of Employer Occupation  
N/A Community Volunteer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

**Transaction ID : C19488062**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 10940 Bellagio Rd

City State Zip Code  
Los Angeles CA 90077-3203

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 28 / 2012

**Transaction ID : C19517443**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark H Alcott**

Mailing Address 6 Helena Avenue

City Larchmont State NY Zip Code 10538

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

Name of Employer Paul Weiss Rifkind Wharton & Garrison Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605510**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jane Alexander**

Mailing Address 32 Bellair Drive

City Dobbs Ferry State NY Zip Code 10522

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

Name of Employer none Occupation actress

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2012

**Transaction ID : C19541135**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 28 Pineview Drive

City Brewster State NY Zip Code 10509

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

Name of Employer NY Medical College Occupation VP & Dean, Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19584610**

Amount of Each Receipt this Period  
500.00

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

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

1250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Loretta Anderson**

Mailing Address 57 Hillair Circle

City State Zip Code  
White Plains NY 10605-4501

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

Name of Employer Self Occupation Housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : C19476898**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marilyn Angelson**

Mailing Address 876 Park Avenue

City State Zip Code  
New York NY 10075

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

Name of Employer none Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : C19573193**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Catherine Aresty**

Mailing Address 1404 Flagler Drive

City State Zip Code  
Mamaroneck NY 10543

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 09 / 2012

**Transaction ID : C19491759**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Arnow**

Mailing Address **Weiler Arnow Mgt. Co. Inc.**  
**675 Third Avenue ? 27th Floor**

City **New York** State **NY** Zip Code **10017**

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

Name of Employer **Weiler & Arnow Mgt. Co., Inc.** Occupation **President**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 13 / 2012**

**Transaction ID : C19497176**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Esther-Ann Asch**

Mailing Address **525 East 86th Street**

City **New York** State **NY** Zip Code **10028**

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

Name of Employer **NonProfit** Occupation **Vice President**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 24 / 2012**

**Transaction ID : C19566654**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Maureen Barton**

Mailing Address **51 Valley Rd**

City **Bronxville** State **NY** Zip Code **10708-2211**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : C19585613**

Amount of Each Receipt this Period  
**500.00**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sanford Batkin**

Mailing Address 394 Grand Boulevard

City Scarsdale State NY Zip Code 10583

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

Name of Employer Universal Folding Box Co. Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : C19563841**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Susan L Bauman**

Mailing Address 2 Titus Court

City Katonah State NY Zip Code 10536

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2012**

**Transaction ID : C19573005**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Shari Beckman**

Mailing Address 75 Garden Rd

City Scarsdale State NY Zip Code 10583-2107

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 13 / 2012**

**Transaction ID : C19495264**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark S. Berenzweig**

Mailing Address 405 River W

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C19480863**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Max W Berger**

Mailing Address 181 E 65th Street

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Bernstein Litowitz Berger et al Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19567033**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ann Bialkin**

Mailing Address Four Times Square

City State Zip Code  
NEW YORK NY 10036

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

Name of Employer Occupation  
NONE Social Worker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605258**

Amount of Each Receipt this Period  
500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barry Borodkin**

Mailing Address 1030-10 FRANKLIN AVENUE

City State Zip Code  
N Valley Stream NY 11580

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

Name of Employer Occupation  
BP ASSOCIATES CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 14 / 2012

**Transaction ID : C19554426**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Noam Bramson**

Mailing Address 201 Pinebrook Boulevard

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
City of New Rochelle Mayor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2012

**Transaction ID : C19471585**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Oren Bramson**

Mailing Address 22 Hyatt Road

City State Zip Code  
Briarcliff Manor NY 10510-2609

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

Name of Employer Occupation  
CSFB Bond Trader

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 09 / 2012

**Transaction ID : C19491764**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Beverly G Cannold**

Mailing Address 8 Timber Trail

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C19552341**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Shoshanna Cardin**

Mailing Address 3624 Anton Farms Rd

City State Zip Code  
Pikesville MD 21208

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19584813**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 444 E 82nd St

City State Zip Code  
New York NY 10028-5903

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

Name of Employer Occupation  
Self Psychologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573081**

Amount of Each Receipt this Period  
100.00

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 15 OF 222  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerome Chazen**

Mailing Address 543 North Broadway

City State Zip Code  
Upper Nyack NY 10960

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

Name of Employer Occupation  
The Chazen Foundation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19567029**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen Chesler**

Mailing Address 1 West 72nd Street

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
N/A Foundation Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555877**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**J. T. Childs Jr.**

Mailing Address PO Box 940

City State Zip Code  
South Salem NY 10590

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

Name of Employer Occupation  
Ted Childs LLC Human Resources Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605481**

Amount of Each Receipt this Period  
200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Claar**

Mailing Address 8 Justin Road

City Harrison State NY Zip Code 10528

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

Name of Employer Occupation  
Claar Brothers, Inc. Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19564250**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**H. Rodgin Cohen**

Mailing Address 125 Broad Street

City New York State NY Zip Code 10004

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

Name of Employer Occupation  
Sullivan & Cromwell Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2012

**Transaction ID : C19529169**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Louise S Cohen**

Mailing Address 22 Byron Lane

City Larchmont State NY Zip Code 10538-1618

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : C19465413**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 22 Byron Lane

City State Zip Code  
Larchmont NY 10538-1618

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

Name of Employer Occupation  
R.A. Cohen & Associates, Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2012

**Transaction ID : C19465415**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Clare Coleman**

Mailing Address 2101 16th Street NW, Apt 516

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
NFPRHA President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 12 / 2012

**Transaction ID : C19467675**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Helen Adams Cook**

Mailing Address 207 East 74th Street, Apt. 6F

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Helen Adams Cook Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19589546**

Amount of Each Receipt this Period  
200.00

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

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

3700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Betty Cotton**

Mailing Address 86 Sheldrake Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer Self-Employed Occupation NFP Management Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19593417**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 15 Hansen Ave

City New City State NY Zip Code 10956

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

Name of Employer retired Occupation teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19589383**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruth Cowan**

Mailing Address 320 Central Park West #8G

City New York State NY Zip Code 10025

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

Name of Employer American University Occupation Scholar in Residence

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19564234**

Amount of Each Receipt this Period  
200.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 87 Birchill Drive

City Scarsdale State NY Zip Code 10583

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

Name of Employer Kaye Scholer LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605253**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Maria Cuomo Cuomo Cole**

Mailing Address 1619 Purchase Street

City Purchase State NY Zip Code 10577

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

Name of Employer H.E.L.P. Occupation Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19577258**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas F Curnin**

Mailing Address 57 Willow Ave.

City Larchmont State NY Zip Code 10538

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : C19535549**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin W. Dahill**

Mailing Address 20 W Palisade Ave.  
Apt. 2234

City Englewood State NJ Zip Code 07631-2745

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

Name of Employer United Hospital Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C19480903**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Dannenberg**

Mailing Address 34 Century Ridge rd

City Purchase State NY Zip Code 10577

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : C19495205**

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard B. Dannenberg**

Mailing Address 34 Century Ridge Rd

City Purchase State NY Zip Code 10577-1911

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : C19492351**

Amount of Each Receipt this Period  
750.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ann L Davis**

Mailing Address 2150 West Wesley Road NW

City Atlanta State GA Zip Code 30327

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514994**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gina De Felice**

Mailing Address 16 Stonehedge Drive

City West Nyack State NY Zip Code 10994

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

Name of Employer Cirens Arts Camp of Westchester Occupation Instructor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593388**

Amount of Each Receipt this Period  
375.00

**C.** Full Name (Last, First, Middle Initial)  
**Christian C DiPalermo**

Mailing Address 637 James Street

City Pelham State NY Zip Code 10803

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

Name of Employer TLM Associates Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19488558**

Amount of Each Receipt this Period  
250.00

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

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

1625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia N Dohrenwend</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012	
Mailing Address 60 Summit Avenue		<b>Transaction ID : C19584805</b>	
City Bronxville	State NY	Zip Code 10708	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer County of Westchester	Occupation Director, Archives & Records Center		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Bernard Dolgin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012	
Mailing Address 55 Candlewood Road		<b>Transaction ID : C19573072</b>	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Jean Doyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 19 / 2012	
Mailing Address 1715 21st Street, NW		<b>Transaction ID : C19472618</b>	
City Washington	State DC	Zip Code 20009	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer US Senate	Occupation Legislative Director		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Karen Dunn</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
Mailing Address 1337 Wallach Place NW		<b>Transaction ID : C19486778</b>	
City Washington	State DC	Zip Code 20009	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. James W. Dyer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
Mailing Address 3833 Whitman Rd.		<b>Transaction ID : C19486777</b>	
City Annandale	State VA	Zip Code 22003	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Adrienne K. Eiseman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012	
Mailing Address 140 Woodbrook Rd		<b>Transaction ID : C19605517</b>	
City White	State NY	Zip Code 10605	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00	
Name of Employer Information Requested none		Occupation Information Requested none	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Warren Eisenberg**

Mailing Address 245 Hartshorn Dr

City Short Hills State NJ Zip Code 07078

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : C19471670**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wilma Ellenbogen**

Mailing Address 777 Pelham Road 2G

City New Rochelle State NY Zip Code 10805

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

Name of Employer Allied Converters Inc. Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585409**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert H. Elman**

Mailing Address 615 Westview Avenue

City Nashville State TN Zip Code 37205

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

Name of Employer None Occupation Private Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 26 / 2012

**Transaction ID : C19479962**

Amount of Each Receipt this Period  
1000.00

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

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

2100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sheldon Elsen**

Mailing Address 50 Fenimore Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer None Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 14 / 2012**

**Transaction ID : C19495428**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey J Epstein**

Mailing Address 1020 Park Avenue Apt. 12C

City New York State NY Zip Code 10028

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 24 / 2012**

**Transaction ID : C19566132**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jane Falk**

Mailing Address 3 WILLOW LANE

City scarsdale State NY Zip Code 10583

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

Name of Employer na Occupation na

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2012**

**Transaction ID : C19555233**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Falkenberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012	
Mailing Address 4 Sutton Place		<b>Transaction ID : C19586771</b>	
City New York	State NY	Zip Code 10022	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed	Occupation Interior Designer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1250.00	

Full Name (Last, First, Middle Initial) <b>B. Toni T Fallon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012	
Mailing Address 103 Gedney Street #6K		<b>Transaction ID : C19593392</b>	
City Nyack	State NY	Zip Code 10960	Amount of Each Receipt this Period _____ 225.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Lindsay Farrell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012	
Mailing Address 19 Davids Ln		<b>Transaction ID : C19593419</b>	
City Ossining	State NY	Zip Code 10562	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Open Door Family Medical Center	Occupation Health Care		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 975.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marjorie Feder**

Mailing Address 9 Oxford Road

City State Zip Code  
White Plains NY 10605

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : C19488039**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Bette Fishbein**

Mailing Address 101 Woodlands Rd

City State Zip Code  
Harrison NY 10528

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19596604**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eileen Fisher**

Mailing Address 2 Bridge Street

City State Zip Code  
Irvington NY 10533

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

Name of Employer Occupation  
Eileen Fisher Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : C19488025**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas M Fleisch**

Mailing Address 19 York Road

City Larchmont State NY Zip Code 10538

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

Name of Employer Cromwell Occupation Business Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605255**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Martine M Fleischman**

Mailing Address 98 Rye Ridge Road

City Harrison State NY Zip Code 10528

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

Name of Employer Jetro Cash & Carry Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : C19554374**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dennis J Fleming**

Mailing Address 28 Lake Nanuet Drive

City Nanuet State NY Zip Code 10954

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : C19466099**

Amount of Each Receipt this Period  
50.00

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

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

2050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis J Fleming**

Mailing Address 28 Lake Nanuet Drive

City Nanuet	State NY	Zip Code 10954
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555934**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott J Fleming**

Mailing Address 3467 Mildred Drive

City Falls Church	State VA	Zip Code 22042
----------------------	-------------	-------------------

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

Name of Employer Georgetown University	Occupation Associate Vice President for Federal R
---	--

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2012

**Transaction ID : C19469620**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 5344 Falmouth Rd

City Bethesda	State MD	Zip Code 20816
------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19563903**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David H Freed DHA**

Mailing Address 160 N Midland Ave

City Nyack	State NY	Zip Code 10960
---------------	-------------	-------------------

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

Name of Employer Nyack Hospital	Occupation President & CEO
------------------------------------	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : C19539363**

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
**David H Freed DHA**

Mailing Address 160 N Midland Ave

City Nyack	State NY	Zip Code 10960
---------------	-------------	-------------------

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

Name of Employer Nyack Hospital	Occupation President & CEO
------------------------------------	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593387**

Amount of Each Receipt this Period  
125.00

**C.** Full Name (Last, First, Middle Initial)  
**Martin Freiman**

Mailing Address 9 The Crossing At Blind Brook

City Purchase	State NY	Zip Code 10577
------------------	-------------	-------------------

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

Name of Employer Self-Employed	Occupation Consultant
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573020**

Amount of Each Receipt this Period  
200.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Meghan French**

Mailing Address 69 Hillcrest Ave

City Larchmont State NY Zip Code 10538

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

Name of Employer Pace University Occupation external

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : C19488260**

Amount of Each Receipt this Period  
350.00

**B.** Full Name (Last, First, Middle Initial)  
**Amy Friedkin**

Mailing Address 44 Montgomery 41st Floor

City San Francisco State CA Zip Code 94104

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

Name of Employer N/A Occupation Community Volunteer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : C19488052**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sheila Friedland**

Mailing Address 196 Hillair Circle

City White Plains State NY Zip Code 10605

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

Name of Employer Westchester Jewish Conference Occupation Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563846**

Amount of Each Receipt this Period  
1000.00

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

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

1850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Elizabeth Bell Friou</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012
Mailing Address 21 Beech Lane		<b>Transaction ID : C19576484</b>
City Sleepy Hollow	State NY	Zip Code 10591
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Self Employed	Occupation Composer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Martin Frost</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2012
Mailing Address 1152 15th Street, NW Suite 800		<b>Transaction ID : C19476884</b>
City Washington	State DC	Zip Code 20005-1723
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Polsinelli & Shughart P.C.	Occupation Government Affairs	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Annette Fry</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2012
Mailing Address 7 High Rd		<b>Transaction ID : C19563852</b>
City Bronxville	State NY	Zip Code 10708-4909
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Not employed	Occupation Homemaker	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan A. Fuirst**

Mailing Address 13575 Rhone Cir

City State Zip Code  
Palm Beach Gardens FL 33410-1202

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : C19506830**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Paula P Gamache**

Mailing Address 14 Lake Road

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
LAMCO LLC analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19589437**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Phyllis H Garland**

Mailing Address 31 Bittersweet Lane

City State Zip Code  
Mount Kisco NY 10549-3706

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

Name of Employer Occupation  
none retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2012

**Transaction ID : C19526458**

Amount of Each Receipt this Period  
25.00

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

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

1225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address **PO Box 9945**

City **McLean** State **VA** Zip Code **22102**

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

Name of Employer **Gephardt Government Affairs** Occupation **President/CEO**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 25 / 2012**

**Transaction ID : C19476449**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carl Goldman**

Mailing Address **150 Central Park South #806**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Corporate Capital Consultants Inc.** Occupation **Investment Advisor**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : C19585655**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Bennett W. Golub**

Mailing Address **710 Taylor Lane**

City **Mamaroneck** State **NY** Zip Code **10543**

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

Name of Employer **Blackrock Financial Management** Occupation **Economist**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 24 / 2012**

**Transaction ID : C19476877**

Amount of Each Receipt this Period  
**2500.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**E. Robert Goodkind**

Mailing Address 9 Douglas Circle

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
Goodkind Labaton Rudoff Sucharow Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486784**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Allan Goodman**

Mailing Address 1337 28th Street NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19598097**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Goodman**

Mailing Address 1401 17th Street, NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
Creative Associates Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : C19572846**

Amount of Each Receipt this Period  
500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 2090 Manzanita Drive

City: Oakland State: CA Zip Code: 94611

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 06 / 2012

**Transaction ID : C19488050**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**jamie Beck gordon**

Mailing Address 628 orienta avenue

City: mamaroneck State: NY Zip Code: 10543

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

Name of Employer: none Occupation: housewife

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 09 / 2012

**Transaction ID : C19541558**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 11 Avondale Road

City: White Plains State: NY Zip Code: 10605

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

Name of Employer: Stadtmauer Bailkin Biggins LLP Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 29 / 2012

**Transaction ID : C19605514**

Amount of Each Receipt this Period: 100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paula Gottesman**

Mailing Address 7 Quaker Ridge Road

City Morristown	State NJ	Zip Code 07960
--------------------	-------------	-------------------

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : C19506136**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ruth Gottesman**

Mailing Address 26 Island Drive

City Rye	State NY	Zip Code 10580
-------------	-------------	-------------------

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

Name of Employer none	Occupation retired
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C19508847**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 146 Brite Avenue

City Scarsdale	State NY	Zip Code 10583
-------------------	-------------	-------------------

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

Name of Employer Gottlieb, Rackman & Reisman	Occupation Patent Attorney
---	-------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573007**

Amount of Each Receipt this Period  
250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Emily Grant**

Mailing Address 1016 Orienta Ave

City Mamaroneck State NY Zip Code 10543

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

Name of Employer none Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : C19515109**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tamara Greeman**

Mailing Address 11 Birchfield Road

City Larchmont State NY Zip Code 10538

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

Name of Employer N/A Occupation Artist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573118**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 170 June Road

City Stamford State CT Zip Code 06903

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 10 / 2012

**Transaction ID : C19542833**

Amount of Each Receipt this Period  
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Grodd**

Mailing Address 1035 5th Avenue

City State Zip Code  
New York NY 10028

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

Name of Employer none Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : C19506003**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Stanley Grossman**

Mailing Address 160 West 66th Street #57C

City State Zip Code  
New York NY 10023-6555

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

Name of Employer Pomerantz Haudek Block Grossman Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19504815**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ned Gurevich**

Mailing Address 177 E. 75th St. Apt.15F

City State Zip Code  
New York NY 10021

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

Name of Employer Entertainment Risk Agency, Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : C19549212**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jainah Hamann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address 64 Park Avenue		<b>Transaction ID : C19584809</b>
City Bronxville	State NY	Zip Code 10708
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested	Occupation Nurse	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ronald Hanna</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012
Mailing Address 42 Camphill Rd		<b>Transaction ID : C19593431</b>
City Pomona	State NY	Zip Code 10970
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Jason Hegt</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012
Mailing Address 204 Broadfield Road		<b>Transaction ID : C19529516</b>
City New Rochelle	State NY	Zip Code 10804
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 10203 Bieber Place

City State Zip Code  
Silver Spring NY 20901

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

Name of Employer Occupation  
WSW Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19485278**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Harriet S. Helfenbein**

Mailing Address 25 Attitash Street

City State Zip Code  
Chappaqua NY 10514

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

Name of Employer Occupation  
White Plains School Speech Pathologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19593407**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 8 Garden LAne

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Occupation  
Self-employed Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C19518943**

Amount of Each Receipt this Period  
500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Betty Himmel**

Mailing Address 10 Ponds Lane

City Purchase State NY Zip Code 10577

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

Name of Employer N/A home maker Occupation N/A home maker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514973**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Betty Himmel**

Mailing Address 10 Ponds Lane

City Purchase State NY Zip Code 10577

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

Name of Employer N/A home maker Occupation N/A home maker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563855**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruth Hinerfeld**

Mailing Address 11 Oak Lane

City Larchmont State NY Zip Code 10538

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

Name of Employer none Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : C19495130**

Amount of Each Receipt this Period  
100.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dorothy Hines**

Mailing Address **PO BOX 274**

City **Warren** State **VT** Zip Code **05674**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C19605513**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Enrica Hodoruk Kelly**

Mailing Address **267 S Greenbush Rd**

City **Blauvelt** State **NY** Zip Code **10913**

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

Name of Employer **Xaviars Restaurant Group** Occupation **Chef**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2012**

**Transaction ID : C19471649**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Judith Hoffman**

Mailing Address **2223 Viking Drive NW**

City **Rochester** State **MN** Zip Code **55901**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C19605484**

Amount of Each Receipt this Period  
**100.00**

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

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

**450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Russell M Holdstein**

Mailing Address 2 Buckeye Way

City State Zip Code  
Kentfield CA 94904

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

Name of Employer Occupation  
Self Employed Business Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 06 / 2012

**Transaction ID : C19488054**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4106 22nd Street NW

City State Zip Code  
Washington DC 20018

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

Name of Employer Occupation  
Creative Associates International Director External Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19563896**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ruth Horowitz**

Mailing Address 975 Park Ave

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
IFC Asset Management Company Private Equity

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : C19497103**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Heather H Howard**

Mailing Address 50 Aiken Ave

City State Zip Code  
Princeton NJ 08540-5258

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

Name of Employer Occupation  
Robert Wood Johnson Foundation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 03 / 2012

**Transaction ID : C19488555**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda Howitt**

Mailing Address 12 Orchard Place

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : C19566150**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Chris Hughes**

Mailing Address PO box 524

City State Zip Code  
Garrison NY 10524

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

Name of Employer Occupation  
The New Republic Publisher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2012

**Transaction ID : C19531872**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 46 OF 222

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Isaac**

Mailing Address 2603 DeWitt Avenue

City State Zip Code  
 Alexandria VA 22301

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

Name of Employer Occupation  
 Self-Employed Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2012

**Transaction ID : C19469648**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Israel**

Mailing Address 21 East 79th Street

City State Zip Code  
 New York NY 10021

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

Name of Employer Occupation  
 Barbara Israel Garden Antiques Antique Dealer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19586705**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Justin Israel**

Mailing Address 150 Central Park S. Apt 1601

City State Zip Code  
 New York NY 10019-1566

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

Name of Employer Occupation  
 KIDS Volunteer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19584812**

Amount of Each Receipt this Period  
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Liz and Alan Jaffe**

Mailing Address 7 West 81Street

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Proskauer Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : C19510452**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Joan Kahn**

Mailing Address 812 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19564263**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Kahn**

Mailing Address 22 Lafayette Dr

City State Zip Code  
New City NY 10956

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19596589**

Amount of Each Receipt this Period  
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judy Kallman**

Mailing Address 66 Fieldpoint Road

City State Zip Code  
Greenwich CT 06830

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 24 / 2012

**Transaction ID : C19476876**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Janet Kastenber**

Mailing Address 200 Chamber's Street  
Apt 201

City State Zip Code  
New York NY 10007

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : C19569207**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1735 New Hampshire Avenue, NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Information Requested Occupation Information Requested  
Podesta Group Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : C19476878**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Priscilla Kauff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012
Mailing Address 149 East 73rd Street		<b>Transaction ID : C19586730</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation Psychoanalyst	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>George S Kaufman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2012
Mailing Address 450 Seventh Avenue		<b>Transaction ID : C19566155</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kaufman Realty Corp.	Occupation Executive	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) <b>joshua kaufman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2012
Mailing Address 8 sunny ridge road		<b>Transaction ID : C19577716</b>
City new rochelle	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer joshua jay kaufman	Occupation attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Surendra K. Kaushik**

Mailing Address 221 Macy Road

City Briarcliff Manor State NY Zip Code 10510

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

Name of Employer Pace University Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : C19506841**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Surendra K. Kaushik**

Mailing Address 221 Macy Road

City Briarcliff Manor State NY Zip Code 10510

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

Name of Employer Pace University Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19566126**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Judith S. Kaye**

Mailing Address 101 Central Park W Apt 5A

City New York State NY Zip Code 10023-4204

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

Name of Employer Skadden Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573190**

Amount of Each Receipt this Period  
500.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lida Keltz</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2012	
Mailing Address 153 Devoe Avenue		<b>Transaction ID : C19573113</b>	
City Yonkers	State NY	Zip Code 10705	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Self Employed	Occupation Medical Assistant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Lori Klinghoffer</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2012	
Mailing Address 33 Wildwood Drive		<b>Transaction ID : C19506138</b>	
City Short Hills	State NJ	Zip Code 07078	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Valcon Engineering Corp.	Occupation Executive		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Steven Klinghoffer</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2012	
Mailing Address 33 Wildwood Dr		<b>Transaction ID : C19506137</b>	
City Short Hills	State NJ	Zip Code 07078-3027	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2100.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David Koenigsberg**

Mailing Address 138 Ogden Avenue

City Dobbs Ferry State NY Zip Code 10522

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

Name of Employer Menz Bonner Komar & Koenigsberg LLP Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19589002**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen Koppelman**

Mailing Address 555 Park Avenue, #10W

City New York State NY Zip Code 10065

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19566767**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Anne Kornreich**

Mailing Address 171 High Ave

City Nyack State NY Zip Code 10960

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593369**

Amount of Each Receipt this Period  
250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Krasnow**

Mailing Address 10 Oakley Road

City State Zip Code  
White Plains NY 10606

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

Name of Employer Occupation  
Retired Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : C19573068**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Steve A. Kroll**

Mailing Address 58 Linda Court

City State Zip Code  
Delmar NY 12054

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

Name of Employer Occupation  
Healthcare Assoc. of NYS Treasurer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2012

**Transaction ID : C19465565**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Kronish**

Mailing Address 535 East 86th St

City State Zip Code  
NYC NY 10028

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

Name of Employer Occupation  
Kronish Associates, Inc. Financial Planning

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 20 / 2012

**Transaction ID : C19508582**

Amount of Each Receipt this Period  
50.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anne Krupman**

Mailing Address 2 Ponds Ln

City State Zip Code  
Purchase NY 10577-1711

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

Name of Employer Occupation  
Krupman Family Foundation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C19593416**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**CHARITO KRUVANT**

Mailing Address 2061 Bent Ln

City State Zip Code  
Delaplane VA 20144

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

Name of Employer Occupation  
Creative Associates International PRESIDENT AND CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : C19563865**

Amount of Each Receipt this Period  
**2400.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jessica Kruvant**

Mailing Address 7134 Merrimac Dr

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2012**

**Transaction ID : C19563867**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 10293 Possom Hollow Rd

City State Zip Code  
Delaplane VA 20144

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19563874**

Amount of Each Receipt this Period  
2400.00

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Laird-White**

Mailing Address 168 High Ave

City State Zip Code  
Nyack NY 10960

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593391**

Amount of Each Receipt this Period  
225.00

**C.** Full Name (Last, First, Middle Initial)  
**Carlos Lama**

Mailing Address 1 Prince William Parkway

City State Zip Code  
Woodbridge VA 22193

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

Name of Employer Information Requested Occupation Information Requested  
CML Designs Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19563898**

Amount of Each Receipt this Period  
250.00

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

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

2875.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hugh Lamle**

Mailing Address 401 East 84th Street PH A

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
M.D. Sass Investors Services, Inc. Exec. Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2012

**Transaction ID : C19605248**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Langerman**

Mailing Address 11 Arlene Court

City State Zip Code  
Short Hills NJ 07078

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2012

**Transaction ID : C19564141**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 23 Roundhill Road

City State Zip Code  
Chappaqua NY 10514

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

Name of Employer Occupation  
self consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : C19506828**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael E Laub</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012
Mailing Address 44 Neustadt Lane		<b>Transaction ID : C19605505</b>
City Chappaqua	State NY	
Zip Code 10514		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Michael Laub Company	Occupation Real Estate	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Allison Lee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012
Mailing Address 67 Brucken Road		<b>Transaction ID : C19485692</b>
City Hurley	State NY	
Zip Code 12443		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer dkc government affairs	Occupation director	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Sande Iefkowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012
Mailing Address 26 Cygnet Rd		<b>Transaction ID : C19593370</b>
City Congers	State NY	
Zip Code 10920		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Ellis Sotheby's International Realty	Occupation Ms	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elisabeth Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 05 / 2012	
Mailing Address 2 E 61st Street Suite 1502		<b>Transaction ID : C19471659</b>	
City New York	State NY	Zip Code 10065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Corporate Art Directions	Occupation Art Consultant		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Ezra G Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012	
Mailing Address 5260 Sycamore Avenue		<b>Transaction ID : C19584786</b>	
City Bronx	State NY	Zip Code 10471	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Kramer Levin Naftalis & Frankel LLP	Occupation Partner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3300.00		

Full Name (Last, First, Middle Initial) <b>C. Michael E Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2012	
Mailing Address 2 Chestnut Hill Drive		<b>Transaction ID : C19471667</b>	
City Manalapan	State NJ	Zip Code 07726	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Levin, Shea, & Pfeffer, PA	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Sharon S Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012
Mailing Address 3016 Tilden Street NW #303		<b>Transaction ID : C19486781</b>
City Washington	State DC	
Zip Code 20008	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>Sharon S Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012
Mailing Address 3016 Tilden Street NW #303		<b>Transaction ID : C19593427</b>
City Washington	State DC	
Zip Code 20008	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>Susanna Levin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2012
Mailing Address 1255 North Ave. #3l		<b>Transaction ID : C19508576</b>
City New Rochelle	State NY	
Zip Code 10804	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00
Name of Employer Montefiore Med. Ctr	Occupation NP	Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alanna Levine**

Mailing Address 422 Western Highway

City Tappan State NY Zip Code 10983

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

Name of Employer Orangetown Pediatrics Occupation Pediatrician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593441**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**LINDA W. LEVINE**

Mailing Address 5 KNOX ROAD

City EASTCHESTER State NY Zip Code 10709

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

Name of Employer NONE Occupation RETIRED TEACHER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2012

**Transaction ID : C19456599**

Amount of Each Receipt this Period  
 25.00

**C.** Full Name (Last, First, Middle Initial)  
**Alan D. Levow**

Mailing Address 2891 Howell Mill Rd NW

City Atlanta State GA Zip Code 30327-1333

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

Name of Employer Crowne Partners Occupation Real Estate Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514991**

Amount of Each Receipt this Period  
 1000.00

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

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

1525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nathan Lindenbaum**

Mailing Address 464 Winthrop Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Etzioni Partners, LLC Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : C19476881**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Carmela Lindley-Banks**

Mailing Address 3115 Russell Rd

City State Zip Code  
Alexandria VA 22305-1721

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

Name of Employer Occupation  
AT&T Asst Vice President, Federal Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2012

**Transaction ID : C19486856**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary D. Lindsay**

Mailing Address 16 Sutton Place

City State Zip Code  
New York NY 10022-3179

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 03 / 2012

**Transaction ID : C19465441**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Katherine Lobach**

Mailing Address 238 Kensington Oval

City State Zip Code  
New Rochelle NY 10805

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19564252**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jenny Luray**

Mailing Address 3554 Appleton Street NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
President, Komen Advocacy Alliance Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486780**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nell Maceda**

Mailing Address 1718 U Street NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
US House of Reps Aide

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2012

**Transaction ID : C19471592**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony J. Mahler**

Mailing Address 4661 Palisade Ave

City State Zip Code  
Bronx NY 10471

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

Name of Employer Occupation  
Westchester Medical Center Senior VP Strategic Planning

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C19480885**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Pablo Maldonado**

Mailing Address 4231 Mathewson Drive

City State Zip Code  
N.W. DC 20011

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

Name of Employer Occupation  
Creative Associates Int'l. In'l Ed consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19561653**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Leni May**

Mailing Address 146 Central Park Avenue West, #15E

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
N/A Volunteer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563850**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bernard Mayrsohn**

Mailing Address 34 Brae Burn Drive

City State Zip Code  
Purchase NY 10577-1004

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

Name of Employer Occupation  
Mayrsohn International Trading Co. Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2012

**Transaction ID : C19465562**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Bernard Mayrsohn**

Mailing Address 34 Brae Burn Drive

City State Zip Code  
Purchase NY 10577-1004

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

Name of Employer Occupation  
Mayrsohn International Trading Co. Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : C19573015**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 369 Gundry Drive

City State Zip Code  
Falls Church VA 22046

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

Name of Employer Occupation  
CAII Sr. Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2012

**Transaction ID : C19563900**

Amount of Each Receipt this Period  
250.00

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

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

700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**thomas L. mcMahon**

Mailing Address 360 Furman Street, Apt. 519

City State Zip Code  
Brooklyn NY 11201

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : C19481994**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Leticia Mederos**

Mailing Address 17117 Trundle Road

City State Zip Code  
Dickerson MD 20842

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

Name of Employer Occupation  
National Partnership non-profit

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 25 2012

**Transaction ID : C19569394**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 9014 Marseille Dr.

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 02 2012

**Transaction ID : C19486782**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Melvin Miller**

Mailing Address 215 West 75th Street

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Bolton St. Johns Inc. Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 24 / 2012

**Transaction ID : C19566168**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Zitner Millman**

Mailing Address 911 Park Avenue

City State Zip Code  
New York NY 10075

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

Name of Employer Occupation  
self employed real estate broker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : C19568445**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Cheryl Milstein**

Mailing Address 2 Kensington Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
N/A Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : C19506837**

Amount of Each Receipt this Period  
2500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sally Minard**

Mailing Address 133 East 62nd Street

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Franklin D. Roosevelt Four Freedoms Pa President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2012

**Transaction ID : C19544650**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Katherine Moore**

Mailing Address 4100 Theall Road

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514976**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen F. Moseley**

Mailing Address 7207 Fairfax Road

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
retired/volunteer international development

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : C19561305**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louise Muller**

Mailing Address 23 Priory Lane

City Pelham State NY Zip Code 10803

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : C19522951**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Roger Mulvihill**

Mailing Address 1085 Park Avenue - Apt. 3C

City New York State NY Zip Code 10128

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

Name of Employer Dechert Price & Rhoads Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605250**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Mulvilhill**

Mailing Address 250 W 65th St

City New York State NY Zip Code 10023

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

Name of Employer Lincoln Square Neighborhood Center Occupation Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C19558398**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark M Murray**

Mailing Address 6511 Princeton Dr.

City: Alexandria State: VA Zip Code: 22307

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

Name of Employer: Cornerstone Government Affairs Occupation: Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1250.00

Date of Receipt: 08 / 02 / 2012

**Transaction ID : C19486859**

Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Maxine Myers**

Mailing Address 93 Giordano Dr

City: West Orange State: NJ Zip Code: 07052-4118

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3550.00

Date of Receipt: 09 / 29 / 2012

**Transaction ID : C19605485**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Beverly Neufeld**

Mailing Address 931 GREACEN POINT RD

City: MAMARONECK State: NY Zip Code: 10543

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

Name of Employer: self Occupation: nonprofit consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 16 / 2012

**Transaction ID : C19506141**

Amount of Each Receipt this Period: 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Priscilla Newman**

Mailing Address 330 Pondfield Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : C19584801**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen B Nnenner**

Mailing Address 82-28 surrey place

City State Zip Code  
jamaica NY 11432

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

Name of Employer Occupation Information Requested  
none retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 01 / 2012

**Transaction ID : C19528917**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Martin Nussbaum**

Mailing Address 1070 Park Avenue Apt. 3D

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation Information Requested  
Dechert LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 12 / 2012

**Transaction ID : C19549210**

Amount of Each Receipt this Period  
500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Thomas O'Donnell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 25 / 2012	
Mailing Address 10 West Kirke Street		<b>Transaction ID : C19476436</b>	
City Chevy Chase	State MD	Zip Code 20815	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Gephardt Government Affairs	Occupation Managing Partner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. John Peter Olinger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2012	
Mailing Address 1244 Duncan Place NE		<b>Transaction ID : C19486776</b>	
City Washington	State DC	Zip Code 20002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Downey McGrath Group Inc.	Occupation Senior Vice President		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Margaret Orr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2012	
Mailing Address 18 MINTURN STREET		<b>Transaction ID : C19466070</b>	
City HASTINGS ON HUDSON	State NY	Zip Code 10706	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Bank Street College	Occupation faculty		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 775.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Valarie Overton**

Mailing Address 277 Oxford Road

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Self Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C19509513**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Phyllis S. Oxman**

Mailing Address 37 Montgomery Lane

City State Zip Code  
Greenwich CT 06830

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

Name of Employer Occupation  
N/A Art History Teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : C19471651**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 200 East 90th Street  
Apartment 29A

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Kleinberg, Kaplan, et al. Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19561507**

Amount of Each Receipt this Period  
2500.00

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

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

3100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronnie Parker**

Mailing Address 200 East 90th Street  
Apartment 29A

City New York State NY Zip Code 10128

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

Name of Employer ATIS Occupation Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C19564291**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew PAVEN**

Mailing Address 9 Brewster Rd

City Hingham State MA Zip Code 02043

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

Name of Employer O'Neill and Associates Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : C19535429**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Fred Neil Peck**

Mailing Address 3 Dorchester Avenue

City New City State NY Zip Code 10956

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

Name of Employer none Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : C19538562**

Amount of Each Receipt this Period  
100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**jane Petro**

Mailing Address 40 A Pond St

City State Zip Code  
Jamaica Plain MA 02130

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

Name of Employer self Occupation surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : C19521271**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 108 Rockford Grove Lane

City State Zip Code  
Wilmington DE 19806-2246

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : C19471668**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Leslie Pollack**

Mailing Address 8 Long Meadow Road

City State Zip Code  
Bedford NY 10506

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555891**

Amount of Each Receipt this Period  
1000.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Yvonne Pollack**

Mailing Address 8 Long Meadow Road

City Bedford State NY Zip Code 10506

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555888**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lilly Lieb Port**

Mailing Address 25 Murray Hill Rd

City Scarsale State NY Zip Code 10583

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573058**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Potash**

Mailing Address 950 Sylvan Ln

City Mamaroneck State NY Zip Code 10543

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

Name of Employer The Distinguished Programs Conservatory Occupation Chaiman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C19566164**

Amount of Each Receipt this Period  
2500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. JON POUSETTE-DART</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012	
Mailing Address 932 HAVERSTRAW RD		<b>Transaction ID : C19593377</b>	
City SUFFERN	State NY	Zip Code 10901	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Richard Propper</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012	
Mailing Address 99 Brush Hollow Close		<b>Transaction ID : C19576515</b>	
City Rye Brook	State NY	Zip Code 10573	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Orkin's Affiliates	Occupation Real Estate Management		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>C. David Rhodes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2012	
Mailing Address 305 E 24th Street		<b>Transaction ID : C19576507</b>	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer School of Visual Arts	Occupation Academic		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 3000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 77 OF 222  
(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)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marilyn Rhodes**

Mailing Address 305 E 24th Street

City State Zip Code  
New York NY 10010

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

Name of Employer Occupation  
School of Visual Arts Academic

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 25 2012

**Transaction ID : C19577078**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Marcia Riesman**

Mailing Address 245 Waterman St., Ste. 402

City State Zip Code  
Providence RI 02906-5221

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 07 2012

**Transaction ID : C19539346**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ligija Rociunas**

Mailing Address 32 Shadyside Ave

City State Zip Code  
Nyack NY 10960

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2012

**Transaction ID : C19593373**

Amount of Each Receipt this Period  
300.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amnon Rodan**

Mailing Address 6114 La Salle Ave #442

City State Zip Code  
Oakland CA 94611

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

Name of Employer Occupation  
Rodan & Fields Bus Exec

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 06 / 2012

**Transaction ID : C19488056**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda L Rodd**

Mailing Address 15 Hemlock Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : C19563853**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 39 Valley Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
none none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2012

**Transaction ID : C19494272**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey D. Rose**

Mailing Address 353 Germonds Road

City State Zip Code  
West Nyack NY 10994

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

Name of Employer Occupation  
Advanced Hypnosis Center CMH

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593378**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Alexandra E. Rosen**

Mailing Address 50 Taylor Road

City State Zip Code  
Mount Kisco NY 10549

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : C19465568**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Camilla M rosenfeld**

Mailing Address 8 Coventry Court

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
none homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2012

**Transaction ID : C19494308**

Amount of Each Receipt this Period  
100.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Camilla M rosenfeld**

Mailing Address 8 Coventry Court

City State Zip Code  
Purchase NY 10577

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

Name of Employer none Occupation homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C19508822**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marjorie Rosenthal**

Mailing Address 131 East 66th Street #8A

City State Zip Code  
New York NY 10021

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2012

**Transaction ID : C19565896**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Linda Rosenweig**

Mailing Address 116 Carthage Rd

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19593422**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 100 Chestnut Hill Ln

City State Zip Code  
Stamford CT 06903

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

Name of Employer Occupation  
Towers Watson Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : C19476938**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Joan J Rothman**

Mailing Address 11 Mamaroneck Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : C19558152**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Donald S Rowland**

Mailing Address 41 Glendale Road

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : C19573196**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kim Rubey**

Mailing Address 1001 G St NW  
Suite 400 West -B

City Washington State DC Zip Code 20001

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19488568**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Lisa H Rubin**

Mailing Address 42 East 20th Street, Apt. 5A

City New York State NY Zip Code 10003

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

Name of Employer None Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19485485**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Rosina Rubin**

Mailing Address 10 Tor Terrace

City New City State NY Zip Code 10956

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

Name of Employer Attitude New York, Inc. Occupation Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593374**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fiona Howe Rudin**

Mailing Address 544 East 86th St, Apt PH E

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
The New 42nd Street Vice-Chair

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C19480869**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Rudolph-Shabinsky**

Mailing Address 38 Glen Byron Ave

City State Zip Code  
Nyack NY 10960

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593436**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Cheryl Saban**

Mailing Address 10100 Santa Monica Blvd

City State Zip Code  
Los Angeles CA 90067

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605235**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Haim Saban**

Mailing Address 10100 Santa Monica, Suite 2600

City Los Angeles	State CA	Zip Code 90067
---------------------	-------------	-------------------

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

Name of Employer Saban Entertainment, Inc.	Occupation Chairman & CEO
---	------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605236**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Keith F. Safian**

Mailing Address 18 Cole Drive

City Armonk	State NY	Zip Code 10504
----------------	-------------	-------------------

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

Name of Employer Phelps Memorial Hospital Assocation	Occupation Hospital Administrator
---	--------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2012

**Transaction ID : C19475423**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Evelyn Safran**

Mailing Address 33845 Jackson Rd

City Chagrin Falls	State OH	Zip Code 44022
-----------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19572998**

Amount of Each Receipt this Period  
250.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Catherine Samuels**

Mailing Address 11 Althea Lane

City Larchmont State NY Zip Code 10538

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

Name of Employer None Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19586785**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Arthur Sarnoff**

Mailing Address 151 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer Bruno Appliance Corporation Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563832**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 221 Corona Ave

City Pelham State NY Zip Code 10803

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

Name of Employer Self Employed Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C19558140**

Amount of Each Receipt this Period  
500.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 31 Amundsen Ln

City State Zip Code  
New City NY 10956

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555873**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Schaefer**

Mailing Address 10940 Bellagio Rd

City State Zip Code  
Los Angeles CA 90077-3203

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C19517441**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Carl Schecter**

Mailing Address 164 W 79th St  
Apt 16A

City State Zip Code  
New York NY 10024

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19593421**

Amount of Each Receipt this Period  
500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Scheuer**

Mailing Address 21 Willow Ave.

City Larchmont State NY Zip Code 10538

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

Name of Employer none Occupation writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573185**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ellen Scholle**

Mailing Address 4106 Kendal Way

City Tarrytown State NY Zip Code 10591-1069

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

Name of Employer Self Employed Occupation Designer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573010**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Lois L Schreiber**

Mailing Address 42 Forest Avenue

City Rye State NY Zip Code 10580

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573184**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Judy Schwartz**

Mailing Address 1001 S. Ocean Dr

City Delray Beach	State FL	Zip Code 33483
----------------------	-------------	-------------------

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2012

**Transaction ID : C19465417**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Janet Segal**

Mailing Address 19 Huguenot Drive

City Larchmont	State NY	Zip Code 10538
-------------------	-------------	-------------------

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

Name of Employer Four Winds Hospital	Occupation Chief Operating Officer
---	---------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585434**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Seid**

Mailing Address 22 Woodhaven Dr

City New City	State NY	Zip Code 10956
------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19586716**

Amount of Each Receipt this Period  
250.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joel Seligman**

Mailing Address 21 Kitchawan Rd.

City Pound Ridge State NY Zip Code 10576

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

Name of Employer Northern Westchester Hospital Occupation President/CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2012

**Transaction ID : C19480882**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Meri Selver**

Mailing Address 235 Churchill Road

City Tenafly State NJ Zip Code 07670

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19577061**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Geri Shapiro**

Mailing Address 88 Highland Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19593418**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Phyllis Sharp**

Mailing Address 66 Avon Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19555878**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 300 Martine Avenue, #4-K

City State Zip Code  
White Plains NY 10601

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

Name of Employer Occupation  
Bronx Legal Services Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573115**

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
**Anne Shutkin**

Mailing Address 201 West 74th St., Apt. 11G

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Milbank, Tweed, Hadley & McCloy LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2012

**Transaction ID : C19472596**

Amount of Each Receipt this Period  
250.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Sieroty**

Mailing Address 6022 Wilshire Boulevard, Suite 201

City Los Angeles	State CA	Zip Code 90036
---------------------	-------------	-------------------

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

Name of Employer Sieroty Company, Inc.	Occupation President
---	-------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585408**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Leon Silverman**

Mailing Address 237 Mamaroneck Avenue

City White Plains	State NY	Zip Code 10605
----------------------	-------------	-------------------

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

Name of Employer Silverman Realty Group, Inc.	Occupation Real Estate
--	---------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486783**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Elaine Simon**

Mailing Address 2 Salisbury Point  
Apt 6C

City South Nyack	State NY	Zip Code 10960-4724
---------------------	-------------	------------------------

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

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593371**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harvey I. Sloane**

Mailing Address 3631 39th Street, NW

City Washington State DC Zip Code 20016

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

Name of Employer Institute for Health Policy Analysis Occupation Director, Public Health

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573063**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

Mailing Address 151 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563842**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

Mailing Address 480 Park Ave

City New York State NY Zip Code 10022

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

Name of Employer Pace Editions Inc. Occupation Publisher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : C19573178**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 1600.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Alex Solowey</b>		Date of Receipt MM / DD / YYYY 08 / 02 / 2012
Mailing Address 9 Easthaven Lane		<b>Transaction ID : C19486775</b>
City White Plains	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer none	Occupation surgeon	Amount of Each Receipt this Period 1500.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Eta Somekh</b>		Date of Receipt MM / DD / YYYY 08 / 06 / 2012
Mailing Address 25625 Moody Road		<b>Transaction ID : C19488057</b>
City Los Altos	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Community Volunteer	Amount of Each Receipt this Period 1500.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>John South</b>		Date of Receipt MM / DD / YYYY 09 / 20 / 2012
Mailing Address 7134 Merrimac Dr		<b>Transaction ID : C19563871</b>
City Mc Lean	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Information Requested	Occupation Information Requested	Amount of Each Receipt this Period 2000.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address **2 Fifth Ave Apt 8J**

City **New York** State **NY** Zip Code **10011**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 28 / 2012**

**Transaction ID : C19585631**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Hilda Spitz**

Mailing Address **1 Chrissie Pl. #303E**

City **Scarsdale** State **NY** Zip Code **10583**

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

Name of Employer **none** Occupation **none**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2012**

**Transaction ID : C19564235**

Amount of Each Receipt this Period  
**50.00**

**C.** Full Name (Last, First, Middle Initial)  
**Evan Stavisky**

Mailing Address **2930 138th Street**

City **Flushing** State **NY** Zip Code **11354**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : C19593430**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sy Sternberg**

Mailing Address 9 Stoneleigh Manor Lane

City	State	Zip Code
Purchase	NY	10577

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

Name of Employer	Occupation
N/A	Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19563847**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 405 Lexington Avenue

City	State	Zip Code
New York	NY	10174

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

Name of Employer	Occupation
Blank Rome	Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19598170**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Michele Sumilas**

Mailing Address 3535 Albemarle Street NW

City	State	Zip Code
Washington	DC	20008

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

Name of Employer	Occupation
USG	Senior Advisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2012

**Transaction ID : C19467768**

Amount of Each Receipt this Period  
250.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**S. Donald Sussman**

Mailing Address 100 Sterling Road

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Paloma Partners Management President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2012

**Transaction ID : C19598074**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**William R. Sweeney Jr.**

Mailing Address 915 Lawton St.

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
IFES President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 16 / 2012

**Transaction ID : C19471653**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 132 Hawkea Avenue

City State Zip Code  
Ossining NY 10562

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2012

**Transaction ID : C19555879**

Amount of Each Receipt this Period  
500.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David A. Tanner**

Mailing Address 1120 Park Avenue

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Continental Grain Company Investing

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2012

**Transaction ID : C19565140**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**karen tarnow**

Mailing Address 401 East 60th St apt 30A

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
TARNOW KAREN professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2012

**Transaction ID : C1957578**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Thaler Jr.**

Mailing Address 5 Leonard Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : C19584803**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**The Mathis Harple Group, LLC**

Mailing Address 923 Fifteenth Street, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476913**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Rolf Thorsen**

Mailing Address 5 Balmoral Dr

City New City State NY Zip Code 10956

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593400**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 280 N. Wyoming Ave.

City South Orange State NY Zip Code 07079

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

Name of Employer Occupation  
 DKC Public Relations Communications

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 26 / 2012

**Transaction ID : C19479110**

Amount of Each Receipt this Period  
 2000.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mimi Tse**

Mailing Address 5316 42nd St NW

City Washington State DC Zip Code 20015

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C19563869**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 9 Tallwood Road

City Armonk State NY Zip Code 10504

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

Name of Employer Information Requested Occupation Information Requested  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2012

**Transaction ID : C19490843**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 400 west 12th street, 8A

City New York State NY Zip Code 10014

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

Name of Employer Information Requested Occupation Information Requested  
Cyan Partners, LP Finance

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 16 / 2012

**Transaction ID : C19505893**

Amount of Each Receipt this Period  
750.00

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

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

4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dorothy Turtz**

Mailing Address 1241 Flagler Drive

City Mamaroneck State NY Zip Code 10543

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19576490**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Van Meter**

Mailing Address Healthcare Association of New York  
499 South Capitol Street, SW

City Washington State DC Zip Code 20003

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

Name of Employer Healthcare Association of New York Sta Occupation VP

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2012

**Transaction ID : C19475432**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Vickie Walling**

Mailing Address 4141 N. Henderson Road #218

City Arlington State VA Zip Code 22203

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

Name of Employer Prime Policy Group Occupation consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19513809**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Beth Walsh**

Mailing Address 53 Duxbury Rd

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
Burke Rehab. Hospital Dr.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2012

**Transaction ID : C19479963**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Waroff**

Mailing Address 324 East 41st St Apt. 1003

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
self writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19588907**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Justin Wein**

Mailing Address 900 Stuart Street  
Apt.520

City State Zip Code  
Arlington VA 22203

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2012

**Transaction ID : C19486858**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 222	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 42 Winfield Avenue

City Harrison State NY Zip Code 10528

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573187**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Constance Weissman**

Mailing Address 805 Taylors Lane

City Mamaroneck State NY Zip Code 10543

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486774**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mildred Weissman**

Mailing Address 81 Manursing Way

City Rye State NY Zip Code 10580

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C19558141**

Amount of Each Receipt this Period  
500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lucille Werlinich**

Mailing Address 18 Ponds Lane

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
Retired none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19589166**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Sherrie Westin**

Mailing Address 107 Dellwood Road

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2012

**Transaction ID : C19564266**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dennis P. Whalen**

Mailing Address 54 Church St.  
P.O. Box 888

City State Zip Code  
Coeymans NY 12045

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

Name of Employer Occupation  
HANYS Executive/COO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 26 / 2012

**Transaction ID : C19479966**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kate Whitney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address 320 East 72nd Avenue #16B		<b>Transaction ID : C19585622</b>
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer N/A	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Judith Widmann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2012
Mailing Address 3 Pryer Lane		<b>Transaction ID : C19585139</b>
City Larchmont	State NY	Zip Code 10538
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer N/A	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Eric D. Witkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2012
Mailing Address 103 Wendover Lane		<b>Transaction ID : C19605247</b>
City Rye	State NY	Zip Code 10580
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Littler Mendelson PC	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Diane Wohl**

Mailing Address 141 Heather Lane

City Mill Neck State NY Zip Code 11765

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476923**

Amount of Each Receipt this Period  
 1250.00

**B.** Full Name (Last, First, Middle Initial)  
**Howard Wohl**

Mailing Address 141 Heather Lane

City Mill Neck State NY Zip Code 11765

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476926**

Amount of Each Receipt this Period  
 1250.00

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

Mailing Address 9 Westerleigh Road

City Purchase State NY Zip Code 10577

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

Name of Employer 32 Advisors Occupation CEO - Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19485785**

Amount of Each Receipt this Period  
 2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JUDITH ZABAR**

Mailing Address **451 WEST END AVE**

City **NY** State **NY** Zip Code **10024**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2012**

**Transaction ID : C19519428**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Hayley Zachary**

Mailing Address **3003 Van Ness St. NW - Apt. S606**

City **Washington** State **DC** Zip Code **20008**

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

Name of Employer **Self** Occupation **Consultatnt**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 06 / 2012**

**Transaction ID : C19459888**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **860 Fifth Ave #8K**

City **New York** State **NY** Zip Code **10065**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C19593415**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Zinbarg**

Mailing Address 5 Hardwell Rd

City State Zip Code  
Short Hills NJ 07078-2117

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 15 / 2012

**Transaction ID : C19506139**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Arthur Zuch**

Mailing Address PO Box 522

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation Information Requested  
Optimized Devices inc Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 20 / 2012

**Transaction ID : C19508752**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2710 Macomb ST, NW #106

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation Information Requested  
Winning Strategies Washington Lobbyist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 02 / 2012

**Transaction ID : C19485364**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Laurie Baumel**

Mailing Address 797 Winthrop Rd

City State Zip Code  
Teaneck NJ 07666-2265

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

Name of Employer Self Occupation Physicist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556115A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City State Zip Code  
Englewood NJ 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556115AB**

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Mark Druck**

Mailing Address 650 Palmer Ave

City State Zip Code  
Teaneck NJ 07666-3138

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

Name of Employer Self Occupation MD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556096A**

Amount of Each Receipt this Period  
1500.00

\* Earmarked Contribution: See Below

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
09 / 15 / 2012

**Transaction ID : C19556096AB**

Amount of Each Receipt this Period  
1500.00

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

**B.** Full Name (Last, First, Middle Initial)  
**Mort Fridman**

Mailing Address 826 Winthrop Rd

City Teaneck State NJ Zip Code 07666-2264

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

Name of Employer Self Occupation MD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
09 / 15 / 2012

**Transaction ID : C19556100A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
09 / 15 / 2012

**Transaction ID : C19556100AB**

Amount of Each Receipt this Period  
1000.00

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

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ira Friedman**

Mailing Address 315 Johnson Ave

City State Zip Code  
Teaneck NJ 07666-3105

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

Name of Employer Occupation  
JP Morgan Chase Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2012

**Transaction ID : C19556105A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City State Zip Code  
Englewood NJ 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2012

**Transaction ID : C19556105AB**

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Jon Gellis**

Mailing Address 624 New Bridge Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Sloan Securities Stock Trader

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2012

**Transaction ID : C19556107A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556107AB**

Amount of Each Receipt this Period  
 250.00

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

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

Mailing Address 473 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation MD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556112A**

Amount of Each Receipt this Period  
 250.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556112AB**

Amount of Each Receipt this Period  
 250.00

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

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 1678 Hanover St

City Englewood State NJ Zip Code 07631

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

Name of Employer OU Occupation Executive Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556118A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Norpac (fka North Jersey Pac)**

Mailing Address PO Box 5595

City Englewood State NJ Zip Code 07631

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2012

**Transaction ID : C19556118AB**

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
**nancy bonagura**

Mailing Address 226 church street

City white plains State NY Zip Code 10603

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

Name of Employer Law Office of Steven G. Fauth Occupation paralegal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2012

**Transaction ID : C19471920A**

Amount of Each Receipt this Period  
40.00

\* Earmarked Contribution: See Below

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

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

540.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17070.85

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 05 / 2012

**Transaction ID : C19471920AB**

Amount of Each Receipt this Period  
40.00

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

**B.** Full Name (Last, First, Middle Initial)  
**HOWARD FLUHR**

Mailing Address 433 EAST 56TH ST, APT 11A

City State Zip Code  
NEW YORK NY 10022

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

Name of Employer Occupation  
segal company chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 19 / 2012

**Transaction ID : C19585756A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17070.85

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 28 / 2012

**Transaction ID : C19585756AB**

Amount of Each Receipt this Period  
500.00

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

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dorothy Lichtenstein**

Mailing Address PO Box 1369

City Southampton State NY Zip Code 11969

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

Name of Employer none Occupation not employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2012

**Transaction ID : C19471897A**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17070.85

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2012

**Transaction ID : C19471897AB**

Amount of Each Receipt this Period  
100.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Charles McCorkell**

Mailing Address 156 Westminster Road

City Brooklyn State NY Zip Code 11218

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

Name of Employer Occupation  
Bicycle Habitat Retailer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : C19586014A**

Amount of Each Receipt this Period  
300.00

\* Earmarked Contribution: See Below

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address P.O. Box 382110

City: Cambridge State: MA Zip Code: 02238

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 17070.85

Date of Receipt: 09 / 28 / 2012

**Transaction ID : C19586014AB**

Amount of Each Receipt this Period: 300.00

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

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

Mailing Address 149 Madison Avenue, Suite 803

City: New York State: NY Zip Code: 10016

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

Name of Employer: Occupation: Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 09 / 19 / 2012

**Transaction ID : C19585975A**

Amount of Each Receipt this Period: 250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City: Cambridge State: MA Zip Code: 02238

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 17070.85

Date of Receipt: 09 / 28 / 2012

**Transaction ID : C19585975AB**

Amount of Each Receipt this Period: 250.00

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

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**S. Donald Sussman**

Mailing Address 100 Sterling Road

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Paloma Partners Management President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 06 / 2012

**Transaction ID : C19573264A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
17070.85

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2012

**Transaction ID : C19573264AB**

Amount of Each Receipt this Period  
1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Wiley Rein LLP**

Mailing Address 1776 K Street NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2012

**Transaction ID : C19506826**

Amount of Each Receipt this Period  
250.00

PARTNERSHIP--partners below if itemized

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

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

Mailing Address 1776 K St NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Wiley Rein LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2012

**Transaction ID : C19506827**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\*

**B.** Full Name (Last, First, Middle Initial)  
**A.A. Branca & Co., LLC**

Mailing Address 700 Summer St Ste 1K

City Stamford State CT Zip Code 06901-1001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19515015**

Amount of Each Receipt this Period  
250.00

LLC - Members below if itemized. Permissible funds.

**C.** Full Name (Last, First, Middle Initial)  
**Tony Branca**

Mailing Address 136 S Central Ave.

City Elmsford State NY Zip Code 10523

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19515016**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\*

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

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

250.00

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 222
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Goosetown Network Services**

Mailing Address 58 N Harrison Ave

City State Zip Code  
Congers NY 10920-1937

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19619737**

Amount of Each Receipt this Period  
500.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 58 N Harrison Ave

City State Zip Code  
Congers NY 10920-1937

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

Name of Employer Occupation  
Goosetown Network Services Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19619745**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Gottlieb**

Mailing Address 14 Sterling Road South

City State Zip Code  
Armonk NY 10504

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

Name of Employer Occupation  
Bear Stearns & Co., Inc. Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2012

**Transaction ID : C19619741**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\*

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

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

500.00

237815.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 222
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
145.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : C19612856**

Amount of Each Receipt this Period  
7.39

\* In-Kind: Fundraising Services

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

7.39

7.39

**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 120 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Association for Justice PAC**

Mailing Address **777 6th Street, NW**  
**Suite 200**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2012**

**Transaction ID : C19554361**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARAT**

Mailing Address **222 S PROSPECT AVENUE**  
**C/O FINANCE DEPT**

City **PARK RIDGE** State **IL** Zip Code **60068**

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 02 / 2012**

**Transaction ID : C19486861**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL HYGIENISTS' ASSOCIATION POLITICAL**

Mailing Address **444 N. Michigan**  
**Suite 3400**

City **Chicago** State **IL** Zip Code **60611**

FEC ID number of contributing federal political committee. **C C00345868**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : C19593471**

Amount of Each Receipt this Period  
**500.00**

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

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

**2500.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 222	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Federation of Teachers Committee on Polit**

Mailing Address 555 New Jersey Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00028860**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		29		2012

**Transaction ID : C19605470**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)  
**American Hospital Association Political Action Com**

Mailing Address 325 Seventh Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7500.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		28		2012

**Transaction ID : C19517475**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 630 Plaza Dr.

City Highlands Ranch State CO Zip Code 80129

FEC ID number of contributing federal political committee. **C C00388983**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		02		2012

**Transaction ID : C19486862**

Amount of Each Receipt this Period  
**1000.00**

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

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

**8500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. BAYER CORPORATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 BAYER ROAD

City Pittsburgh State PA Zip Code 15205-9741

FEC ID number of contributing federal political committee. **C C00281162**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476912**

Amount of Each Receipt this Period  
**2000.00**

**B. BGR PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 THIRTEENTH STREET, NW  
ELEVENTH FLOOR SOUTH

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00359588**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C19518935**

Amount of Each Receipt this Period  
**500.00**

**C. Boeing Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1200 Wilson Boulevard

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514978**

Amount of Each Receipt this Period  
**5000.00**

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

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

**7500.00**

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

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

FOR LINE NUMBER: PAGE 123 OF 222  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)  
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

A. Mailing Address 1201 15TH STREET, NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

Transaction ID : C19585534

Amount of Each Receipt this Period  
 3500.00

B. Full Name (Last, First, Middle Initial)  
**Citizens Organized PAC**

Mailing Address 1800 Avenue Of The Stars Suite 900

City State Zip Code  
Los Angeles CA 90067

FEC ID number of contributing federal political committee. **C C00110585**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

Transaction ID : C19518937

Amount of Each Receipt this Period  
 5000.00

C. Full Name (Last, First, Middle Initial)  
**COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS L**

Mailing Address 16 COURT STREET 4TH FLOOR

City State Zip Code  
BROOKLYN NY 11241

FEC ID number of contributing federal political committee. **C C00355818**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

Transaction ID : C19549184

Amount of Each Receipt this Period  
 1000.00

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

9500.00

**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 124 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CRAY PAC**

Mailing Address **241 18TH STREET SUITE 610**

City **Arlington** State **VA** Zip Code **22202**

FEC ID number of contributing federal political committee. **C C00458547**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 23 / 2012**

**Transaction ID : C19514997**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CWA COPE PCC**

Mailing Address **501 Third Street NW #1073**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00002089**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : C19593464**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DELOITTE LLP FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **P.O. BOX 365**

City **WASHINGTON** State **DC** Zip Code **20044**

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 27 / 2012**

**Transaction ID : C19573218**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**EMPIRE POLITICAL ACTION COMMITTEE**

Mailing Address **PO BOX 15033**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00477067**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 12 / 2012**

**Transaction ID : C19471663**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Employees of Northrop Grumman Corp.**

Mailing Address **2980 FAIRVIEW PARK DRIVE**

City **FALLS CHURCH** State **VA** Zip Code **22042**

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 03 / 2012**

**Transaction ID : C19465436**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address **P.O. BOX 75000, PAC SVS MC 2250**

City **DETROIT** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2012**

**Transaction ID : C19555947**

Amount of Each Receipt this Period  
**2000.00**

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

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

**8000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Andy Stewart**

Mailing Address 19 S Mill St

City: Nyack      State: NY      Zip Code: 10960-3717

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : C19539353**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Ellen Jaffee**

Mailing Address 16 Lancaster Drive

City: Suffern      State: NY      Zip Code: 10901

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593459**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 125.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Harriet Cornell**

Mailing Address 13 Moreland Road

City: New City      State: NY      Zip Code: 10956

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593385**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 350.00

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

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

\_\_\_\_\_ 525.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Stephanie Hausner**

Mailing Address 3 Frost Ct

City State Zip Code  
New City NY 10956-6658

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593470**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Thom Kleiner**

Mailing Address 20 Edward St

City State Zip Code  
Sparkill NY 10976

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593460**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Tom Zugibe**

Mailing Address 41 Mountainview Ave

City State Zip Code  
Pearl River NY 10965-2702

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593463**

Amount of Each Receipt this Period  
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476906**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476907**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**General Electric Company PAC**

Mailing Address 1299 Pennsylvania Ave NW #1100

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C19605471**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Goldman Sachs Group, Inc. PAC**

Mailing Address 1101 Pennsylvania Ave, NW  
Suite 900

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C19605469**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Greenberg Traurig Hoffman Lipoff et al PAC**

Mailing Address 1300 Connecticut Ave NW #1000

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00266585**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2012**

**Transaction ID : C19593458**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 13 / 2012**

**Transaction ID : C19497199**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

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

FOR LINE NUMBER: PAGE 130 OF 222  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

A. Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Avenue NW  
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2012**

**Transaction ID : C19549180**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**Int'l Union Of Operating Engineers-Local 137 PAC**

Mailing Address 1360 Pleasantville Road

City Briarcliff Manor State NY Zip Code 10510

FEC ID number of contributing federal political committee. **C C00114371**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 07 / 2012**

**Transaction ID : C19539351**

Amount of Each Receipt this Period  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**Int'l Union Of Operating Engineers-Local 137 PAC**

Mailing Address 1360 Pleasantville Road

City Briarcliff Manor State NY Zip Code 10510

FEC ID number of contributing federal political committee. **C C00114371**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2012**

**Transaction ID : C19549179**

Amount of Each Receipt this Period  
**500.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 222	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL**

Mailing Address **1750 NEW YORK AVE. NW  
SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 26 / 2012**

**Transaction ID : C19480062**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC**

Mailing Address **1750 NEW YORK AVE NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 24 / 2012**

**Transaction ID : C19566182**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA**

Mailing Address **905 16th Street NW  
Second Floor**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2012**

**Transaction ID : C19573222**

Amount of Each Receipt this Period  
**2500.00**

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

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

**8500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lesnick Leadership PAC**

Mailing Address 733 Yonkers Avenue  
Suite 200

City Yonkers State NY Zip Code 10704

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2012

**Transaction ID : C19488628**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees PAC**

Mailing Address 1550 Crystal Drive, Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2012

**Transaction ID : C19514981**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**METAL LATHERS LOCAL 46 PAC**

Mailing Address 1322 THIRD AVENUE

City NEW YORK State NY Zip Code 10021

FEC ID number of contributing federal political committee. **C** C00421008

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573240**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 133 OF 222  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27-01 Queens Plaza North Area 4-D  
 Area 4D  
 City Long Island City State NY Zip Code 11101  
 FEC ID number of contributing federal political committee. **C** C00040923  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 26 / 2012  
**Transaction ID : C19480061**  
 Amount of Each Receipt this Period  
 1000.00

**B. National Committee to Preserve Social Security and Medicare**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Medicare Federal PAC  
 10 G Street Street NE #600  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00172296  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012  
**Transaction ID : C19476905**  
 Amount of Each Receipt this Period  
 1000.00

**C. NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 F STREET NW  
 SUITE 1150  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00424838  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012  
**Transaction ID : C19476903**  
 Amount of Each Receipt this Period  
 1000.00

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 222	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ob-Gyns For Women's Health PAC**

Mailing Address 409 12th Street SW

City Washington State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C19564200**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Planned Parenthood Action Fund PAC**

Mailing Address 434 West 33rd St

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C** C00314617

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2012

**Transaction ID : C19529518**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : C19497201**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585505**

Amount of Each Receipt this Period  
4000.00

**B.** Full Name (Last, First, Middle Initial)  
**REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C19573225**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Seafarers Political Action Committee**

Mailing Address Seafarers Political Activity  
5201 Auth Way

City Camp Springs State MD Zip Code 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486860**

Amount of Each Receipt this Period  
1000.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. Sheet Metal Workers' International Assoc. PAL**

Full Name (Last, First, Middle Initial)  
Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585515**

Amount of Each Receipt this Period  
 5000.00

**B. Town of Haverstraw Democratic Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 471

City West Haverstraw State NY Zip Code 10993

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19583467**

Amount of Each Receipt this Period  
 125.00

**C. Treasury Employees Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1750 H Street, NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C19585539**

Amount of Each Receipt this Period  
 1000.00

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

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

6125.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**TRI-STATE MAXED OUT WOMEN**

Mailing Address 445 PARK AVENUE 9TH FLOOR

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee. **C** C00488387

Name of Employer	Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2012

**Transaction ID : C19465434**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**B. Full Name (Last, First, Middle Initial)**  
**Washington PAC**

Mailing Address 444 NORTH CAPITOL ST NW SUITE 712

City	State	Zip Code
Washington	DC	20001-1538

FEC ID number of contributing federal political committee. **C** C00138560

Name of Employer	Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C19476909**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C. Full Name (Last, First, Middle Initial)**  
**WINNING STRATEGIES WASHINGTON PAC**

Mailing Address 819 7TH STREET NW  
SUITE 501

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C** C00368993

Name of Employer	Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C19486865**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 4500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Zebrowski For Assembly**

Mailing Address 106 Strawtown Rd

City West Nyack State NY Zip Code 10994

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C19593468**

Amount of Each Receipt this Period  
125.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

125.00

97375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>Bank of America, NA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2012
Mailing Address 730 15th St NW		<b>Transaction ID : C19620278</b>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.87	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 615.80	

Full Name (Last, First, Middle Initial) <b>Bank of America, NA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2012
Mailing Address 730 15th St NW		<b>Transaction ID : C19620279</b>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.87	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 615.80	

Full Name (Last, First, Middle Initial) <b>Bank of America, NA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2012
Mailing Address 730 15th St NW		<b>Transaction ID : C19620281</b>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 21.17	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 615.80	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	64.91
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 222
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Citibank, N.A.**

Mailing Address PO Box 5870

City New York State NY Zip Code 10163

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **911.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2012**

**Transaction ID : C19620270**

Amount of Each Receipt this Period  
**82.61**

**B.** Full Name (Last, First, Middle Initial)  
**Citibank, N.A.**

Mailing Address PO Box 5870

City New York State NY Zip Code 10163

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **911.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 31 / 2012**

**Transaction ID : C19620273**

Amount of Each Receipt this Period  
**84.34**

**C.** Full Name (Last, First, Middle Initial)  
**Citibank, N.A.**

Mailing Address PO Box 5870

City New York State NY Zip Code 10163

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **911.48**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : C19620275**

Amount of Each Receipt this Period  
**81.63**

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

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

**248.58**

**313.49**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 0.12 <b>Transaction ID : D517235</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 101.01 <b>Transaction ID : D517236</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 183.28 <b>Transaction ID : D517237</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	284.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 4.56 <b>Transaction ID : D520665</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 0.20 <b>Transaction ID : D521903</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2012
Mailing Address 14 Arrow St.			Amount of Each Disbursement this Period 0.40 <b>Transaction ID : D525949</b>
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Credit Card Processing Fee		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5.16
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2012
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 4.44
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D525951</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 324.84
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D528008</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 14 Arrow St.		Amount of Each Disbursement this Period 19.22
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fee	<b>Transaction ID : D528736</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	348.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	<b>Transaction ID : D533873</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 2978.44
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	<b>Transaction ID : D533874</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	<b>Transaction ID : D533875</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2994.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 06 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>1285.19</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D533876</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 04 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>7.95</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D533877</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 05 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>746.38</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D533878</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2039.52</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Antonio Meucci Lodge #213</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 279 Maple Avenue		Amount of Each Disbursement this Period 925.00 <b>Transaction ID : D533865</b>
City White Plains	State NY	
Zip Code 10606	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D533902</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D533903</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	925.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D533904</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Blue Stripe Creative</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 16 Mt. Ebo Rd South Ste 12A #5		Amount of Each Disbursement this Period 377.15 <b>Transaction ID : D534033</b>
City Brewster	State NY	
Zip Code 10509	Purpose of Disbursement Event Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Buying Time LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 650 Massachusetts Ave NW Ste 210		Amount of Each Disbursement this Period 39499.00 <b>Transaction ID : D534034</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Media Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40276.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Buying Time LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 650 Massachusetts Ave NW Ste 210		Amount of Each Disbursement this Period 49500.00 <b>Transaction ID : D534035</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement Media Buy	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Buying Time LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 650 Massachusetts Ave NW Ste 210		Amount of Each Disbursement this Period 49500.00 <b>Transaction ID : D534036</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement Media Buy	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. C Street Investments</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 901 Seventh St NW Ste 600		Amount of Each Disbursement this Period 1035.00 <b>Transaction ID : D534037</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement Event Room Rental and Staff Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100035.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cablevision</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address P.O. Box 371378		Amount of Each Disbursement this Period 141.65 <b>Transaction ID : D534038</b>
City Pittsburgh	State PA	
Zip Code 15250-7378	Purpose of Disbursement Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cablevision</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address P.O. Box 371378		Amount of Each Disbursement this Period 69.90 <b>Transaction ID : D534039</b>
City Pittsburgh	State PA	
Zip Code 15250-7378	Purpose of Disbursement Internet 9/1-9/30/12	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 71.24 <b>Transaction ID : D533988</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Supplies Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	282.79
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 28.16 <b>Transaction ID : D533989</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Supplies Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 98.79 <b>Transaction ID : D533990</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Supplies Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 38.00 <b>Transaction ID : D533991</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Travel Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	164.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 90.65 <b>Transaction ID : D533992</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement August 16, 2012 Meeting Refreshments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 09 / 10 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 86.91 <b>Transaction ID : D533993</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 29.00 <b>Transaction ID : D533994</b>
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Pre-paid phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	206.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Christine Yankou</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012	
Mailing Address 308 Walnut Place			Amount of Each Disbursement this Period 96.69	
City Syracuse	State NY	Zip Code 13210	Transaction ID : D533995	
Purpose of Disbursement Supplies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Christine Yankou</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012	
Mailing Address 308 Walnut Place			Amount of Each Disbursement this Period 23.40	
City Syracuse	State NY	Zip Code 13210	Transaction ID : D533996	
Purpose of Disbursement Mileage		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Citibank, N.A.</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012	
Mailing Address PO Box 5870			Amount of Each Disbursement this Period 22.01	
City New York	State NY	Zip Code 10163	Transaction ID : D533922	
Purpose of Disbursement Bank Service Charge		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	96.10
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Citibank, N.A.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2012
Mailing Address PO Box 5870		Amount of Each Disbursement this Period 9.51
City New York	State NY	
Zip Code 10163	Purpose of Disbursement Bank Service Charge	Transaction ID : D533923
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 63.45
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Meals	Transaction ID : D534003
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 73.58
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Supplies	Transaction ID : D534004
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 222			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D534005</b>
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Prepaid Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 55.90 <b>Transaction ID : D534006</b>
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Mileage and Tolls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 64.99 <b>Transaction ID : D534007</b>
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Pre-Paid Campaign Phones	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	250.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry de Koninck</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 12 Central Ave			Amount of Each Disbursement this Period 57.61 <b>Transaction ID : D534008</b>
City Montclair	State NJ	Zip Code 07042-2911	
Purpose of Disbursement Office Supplies Reimbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Henry de Koninck</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 12 Central Ave			Amount of Each Disbursement this Period 117.00 <b>Transaction ID : D534009</b>
City Montclair	State NJ	Zip Code 07042-2911	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Deer Park Spring Water</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO Box 856192			Amount of Each Disbursement this Period 11.91 <b>Transaction ID : D533882</b>
City Louisville	State KY	Zip Code 40285-6192	
Purpose of Disbursement Office Supplies		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	186.52
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Deer Park Spring Water</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address PO Box 856192		Amount of Each Disbursement this Period 11.91 <b>Transaction ID : D533883</b>
City Louisville	State KY	
Zip Code 40285-6192	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Deer Park Spring Water</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address PO Box 856192		Amount of Each Disbursement this Period 11.91 <b>Transaction ID : D533884</b>
City Louisville	State KY	
Zip Code 40285-6192	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 430 South Capitol Street SE		Amount of Each Disbursement this Period 7.39 <b>Transaction ID : D531024</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31.21
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Direct Mail of New York, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 3199 Alba Post Road Suite 158		Amount of Each Disbursement this Period 1920.00 <b>Transaction ID : D533941</b>
City Buchanan State NY Zip Code 10511	Purpose of Disbursement Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Direct Mail of New York, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 3199 Alba Post Road Suite 158		Amount of Each Disbursement this Period 2475.00 <b>Transaction ID : D533942</b>
City Buchanan State NY Zip Code 10511	Purpose of Disbursement Postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 428 W 23rd St, #2B		Amount of Each Disbursement this Period 6500.00 <b>Transaction ID : D533906</b>
City New York State NY Zip Code 10011	Purpose of Disbursement Campaign Management Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10895.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 158 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2012</b>
Mailing Address <b>428 W 23rd St, #2B</b>		Amount of Each Disbursement this Period <b>6500.00</b> <b>Transaction ID : D533907</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10011</b>	Purpose of Disbursement <b>Campaign Management Services</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 02 / 2012</b>
Mailing Address <b>428 W 23rd St, #2B</b>		Amount of Each Disbursement this Period <b>6500.00</b> <b>Transaction ID : D533908</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10011</b>	Purpose of Disbursement <b>Campaign Management Services</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 28 / 2012</b>
Mailing Address <b>428 W 23rd St, #2B</b>		Amount of Each Disbursement this Period <b>675.41</b> <b>Transaction ID : D533909</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10011</b>	Purpose of Disbursement <b>Printing, postage, copies</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>13675.41</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kimberly L. DiTomasso</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 28 / 2012</b>	
Mailing Address <b>428 W 23rd St, #2B</b>			Amount of Each Disbursement this Period <b>371.84</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10011</b>	Transaction ID : <b>D533910</b>	
Purpose of Disbursement <b>Supplies</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Kimberly L. DiTomasso</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 28 / 2012</b>	
Mailing Address <b>428 W 23rd St, #2B</b>			Amount of Each Disbursement this Period <b>640.86</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10011</b>	Transaction ID : <b>D533911</b>	
Purpose of Disbursement <b>Mileage</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Kimberly L. DiTomasso</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 28 / 2012</b>	
Mailing Address <b>428 W 23rd St, #2B</b>			Amount of Each Disbursement this Period <b>303.00</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10011</b>	Transaction ID : <b>D533912</b>	
Purpose of Disbursement <b>Travel</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1315.70</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 428 W 23rd St, #2B		Amount of Each Disbursement this Period 8650.00 <b>Transaction ID : D533913</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Campaign Management Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. El Clarin</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 40 Broadway		Amount of Each Disbursement this Period 310.00 <b>Transaction ID : D533918</b>
City Haverstraw	State NY	
Zip Code 10927	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Eli's Bagel Shop Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 58 N Myrtle Ave		Amount of Each Disbursement this Period 1652.72 <b>Transaction ID : D534048</b>
City Spring Valley	State NY	
Zip Code 10977	Purpose of Disbursement Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8462.72
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		28		2012
M M	/	D D	/	Y Y Y Y									
08		28		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>120.39</td> </tr> </table>		120.39			
City	State	Zip Code											
Memphis	TN	38101											
120.39													
Purpose of Disbursement Deliveries		Transaction ID : D533849											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For:												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State:      District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		28		2012
M M	/	D D	/	Y Y Y Y									
08		28		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>52.32</td> </tr> </table>		52.32			
City	State	Zip Code											
Memphis	TN	38101											
52.32													
Purpose of Disbursement Deliveries		Transaction ID : D533850											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For:												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State:      District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		28		2012
M M	/	D D	/	Y Y Y Y									
08		28		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>22.14</td> </tr> </table>		22.14			
City	State	Zip Code											
Memphis	TN	38101											
22.14													
Purpose of Disbursement Deliveries		Transaction ID : D533851											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
<input type="checkbox"/> House	Disbursement For:												
<input type="checkbox"/> Senate													
<input type="checkbox"/> President													
State:      District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	194.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		28		2012
M M	/	D D	/	Y Y Y Y								
08		28		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>18.27</td> </tr> </table>	18.27			
City	State	Zip Code										
Memphis	TN	38101										
18.27												
Purpose of Disbursement Deliveries		Transaction ID : D533852										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>12</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		12		2012
M M	/	D D	/	Y Y Y Y								
09		12		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>25.25</td> </tr> </table>	25.25			
City	State	Zip Code										
Memphis	TN	38101										
25.25												
Purpose of Disbursement Deliveries		Transaction ID : D533853										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>12</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		12		2012
M M	/	D D	/	Y Y Y Y								
09		12		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>50.94</td> </tr> </table>	50.94			
City	State	Zip Code										
Memphis	TN	38101										
50.94												
Purpose of Disbursement Deliveries		Transaction ID : D533854										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	94.46
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>12</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		12		2012
M M	/	D D	/	Y Y Y Y								
09		12		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		<table border="1"> <tr> <td>25.25</td> </tr> </table> Transaction ID : D533855	25.25									
25.25												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		16		2012
M M	/	D D	/	Y Y Y Y								
07		16		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		<table border="1"> <tr> <td>79.68</td> </tr> </table> Transaction ID : D533842	79.68									
79.68												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		16		2012
M M	/	D D	/	Y Y Y Y								
07		16		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		<table border="1"> <tr> <td>23.54</td> </tr> </table> Transaction ID : D533843	23.54									
23.54												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	128.47
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. FEDEX</b>		M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period
City	State	Zip Code
Memphis	TN	38101
Purpose of Disbursement	Category/ Type	Transaction ID : D533844
Deliveries		20.80
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. FEDEX</b>		M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period
City	State	Zip Code
Memphis	TN	38101
Purpose of Disbursement	Category/ Type	Transaction ID : D533845
Deliveries		113.22
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. FEDEX</b>		M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period
City	State	Zip Code
Memphis	TN	38101
Purpose of Disbursement	Category/ Type	Transaction ID : D533846
Deliveries		48.05
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	182.07
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>23</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		23		2012
M M	/	D D	/	Y Y Y Y								
08		23		2012								
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period										
City	State Zip Code											
Memphis	TN 38101	<table border="1"> <tr> <td>28.96</td> </tr> </table>	28.96									
28.96												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D533847</b>										
Deliveries												
Candidate Name												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Ford Credit</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>30</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		30		2012
M M	/	D D	/	Y Y Y Y								
07		30		2012								
Mailing Address PO Box 220564		Amount of Each Disbursement this Period										
City	State Zip Code											
Pittsburgh	PA 15257-2564	<table border="1"> <tr> <td>297.00</td> </tr> </table>	297.00									
297.00												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D533914</b>										
Monthly Car Lease												
Candidate Name												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. Ford Credit</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		28		2012
M M	/	D D	/	Y Y Y Y								
08		28		2012								
Mailing Address PO Box 220564		Amount of Each Disbursement this Period										
City	State Zip Code											
Pittsburgh	PA 15257-2564	<table border="1"> <tr> <td>297.00</td> </tr> </table>	297.00									
297.00												
Purpose of Disbursement	Category/Type	<b>Transaction ID : D533915</b>										
Monthly Car Lease												
Candidate Name												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>622.96</td> </tr> </table>	622.96
622.96		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Ford Credit</b>		M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address PO Box 220564		Amount of Each Disbursement this Period
City Pittsburgh State PA Zip Code 15257-2564		297.00
Purpose of Disbursement Monthly Car Lease		Transaction ID : D533916
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Global Strategy Group, Inc.</b>		M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 895 Broadway, 5th FL		Amount of Each Disbursement this Period
City New York State NY Zip Code 10003		13625.00
Purpose of Disbursement Polling Expense		Transaction ID : D533973
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Global Strategy Group, Inc.</b>		M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 895 Broadway, 5th FL		Amount of Each Disbursement this Period
City New York State NY Zip Code 10003		9386.27
Purpose of Disbursement Research Services		Transaction ID : D533974
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23308.27
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Global Strategy Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012	
Mailing Address 895 Broadway, 5th FL			Amount of Each Disbursement this Period 13625.00	
City New York	State NY	Zip Code 10003	Transaction ID : D533975	
Purpose of Disbursement Polling Expense		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Global Strategy Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012	
Mailing Address 895 Broadway, 5th FL			Amount of Each Disbursement this Period 53.75	
City New York	State NY	Zip Code 10003	Transaction ID : D533976	
Purpose of Disbursement Research Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Global Strategy Group, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012	
Mailing Address 895 Broadway, 5th FL			Amount of Each Disbursement this Period 55.10	
City New York	State NY	Zip Code 10003	Transaction ID : D533977	
Purpose of Disbursement Travel		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13733.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Heather Podesta + Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address Attn: Laura Joshua 901 7th ST NW,		Amount of Each Disbursement this Period 269.49 <b>Transaction ID : D534053</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Henry T. Berger, Attorney at Law</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address Attorney at Law 127 West 77th St		Amount of Each Disbursement this Period 6420.00 <b>Transaction ID : D534054</b>
City New York	State NY	
Zip Code 10024	Purpose of Disbursement Legal Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Henry T. Berger, Attorney at Law</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address Attorney at Law 127 West 77th St		Amount of Each Disbursement this Period 650.70 <b>Transaction ID : D534055</b>
City New York	State NY	
Zip Code 10024	Purpose of Disbursement Legal Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7340.19
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 169 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry T. Berger, Attorney at Law</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2012</b>
Mailing Address <b>Attorney at Law 127 West 77th St</b>		Amount of Each Disbursement this Period <b>1170.00</b> <b>Transaction ID : D534056</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10024</b>	Purpose of Disbursement <b>Legal Services</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Henry T. Berger, Attorney at Law</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2012</b>
Mailing Address <b>Attorney at Law 127 West 77th St</b>		Amount of Each Disbursement this Period <b>63.00</b> <b>Transaction ID : D534057</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10024</b>	Purpose of Disbursement <b>Travel Reimbursement</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2012</b>
Mailing Address <b>139 East Prospect Avenue</b>		Amount of Each Disbursement this Period <b>2684.00</b> <b>Transaction ID : D533925</b>
City <b>Mamaroneck</b> State <b>NY</b> Zip Code <b>10543</b>	Purpose of Disbursement <b>Printing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3917.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 170 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 182.54
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : D533926
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 3454.26
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : D533927
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 2684.38
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name		Transaction ID : D533928
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6321.18
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 3196.56
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	<b>Transaction ID : D533929</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 4080.25
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	<b>Transaction ID : D533930</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 1948.86
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	<b>Transaction ID : D533931</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9225.67
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 192.54 <b>Transaction ID : D533932</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 1664.32 <b>Transaction ID : D533933</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 182.54 <b>Transaction ID : D533934</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2039.40
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 11381.75 <b>Transaction ID : D533935</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 3543.38 <b>Transaction ID : D533936</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jewish Post</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 7016 18th Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D533943</b>
City Brooklyn State NY Zip Code 11204	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15125.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jewish Post</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 7016 18th Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D533944</b>
City Brooklyn	State NY	
Zip Code 11204	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D533957</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D533958</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3133.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D533959</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mack/Crouse Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 2001 N. Beauregard Suite 420		Amount of Each Disbursement this Period 2434.00 <b>Transaction ID : D533979</b>
City Alexandria	State VA	
Zip Code 22311	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mack/Crouse Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2001 N. Beauregard Suite 420		Amount of Each Disbursement this Period 482.00 <b>Transaction ID : D533980</b>
City Alexandria	State VA	
Zip Code 22311	Purpose of Disbursement Literature Production	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4382.66
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mack/Crouse Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 17 / 2012</b>
Mailing Address 2001 N. Beauregard Suite 420		Amount of Each Disbursement this Period <b>387.00</b>
City Alexandria	State VA	Zip Code 22311
Purpose of Disbursement Travel Reimbursement	Category/ Type	
Candidate Name	Transaction ID : <b>D533981</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Madeline Johl</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 26 / 2012</b>
Mailing Address 19 Audobon Dr		Amount of Each Disbursement this Period <b>750.00</b>
City Ossining	State NY	Zip Code 10562
Purpose of Disbursement Administrative Services	Category/ Type	
Candidate Name	Transaction ID : <b>D534060</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Madeline Johl</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 13 / 2012</b>
Mailing Address 19 Audobon Dr		Amount of Each Disbursement this Period <b>750.00</b>
City Ossining	State NY	Zip Code 10562
Purpose of Disbursement Administrative Services	Category/ Type	
Candidate Name	Transaction ID : <b>D534061</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1887.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Murphy Vogel Askew Reilly LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012
Mailing Address 901 N Washington St Suite 400		Amount of Each Disbursement this Period 36172.32 <b>Transaction ID : D534067</b>
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Media Production	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN Software, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1101 15th St NW Suite 500		Amount of Each Disbursement this Period 1950.00 <b>Transaction ID : D533870</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Software License Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN Software, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 1101 15th St NW Suite 500		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D533871</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Software License Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	39622.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Software, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 1101 15th St NW Suite 500		Amount of Each Disbursement this Period 48.42 <b>Transaction ID : D533872</b>
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Domain Name Renewal	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period 3750.00 <b>Transaction ID : D533945</b>
City New Rochelle	State NY Zip Code 10804	
Purpose of Disbursement Strategic Consulting Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period 3750.00 <b>Transaction ID : D533946</b>
City New Rochelle	State NY Zip Code 10804	
Purpose of Disbursement Strategic Consulting Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7548.42
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period 3750.00
City New Rochelle	State NY	
Zip Code 10804	Purpose of Disbursement Strategic Consulting Services	Transaction ID : D533947
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. North Star Insurance Agency</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 2200 65th St		Amount of Each Disbursement this Period 2148.86
City Brooklyn	State NY	
Zip Code 11204	Purpose of Disbursement General Liability Insurance	Transaction ID : D534069
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nyack Villager</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address P.O. Box 82		Amount of Each Disbursement this Period 950.00
City Nyack	State NY	
Zip Code 10960	Purpose of Disbursement Print Ads	Transaction ID : D534070
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6848.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 180 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Orange and Rockland</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2012
Mailing Address PO Box 1005		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D534071</b>
City Spring Valley	State NY	
Zip Code 10977	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Orange and Rockland</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2012
Mailing Address PO Box 1005		Amount of Each Disbursement this Period 46.92 <b>Transaction ID : D534072</b>
City Spring Valley	State NY	
Zip Code 10977	Purpose of Disbursement Utilities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 2539.09 <b>Transaction ID : D533900</b>
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2886.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 114.19
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : D533901</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 2061.47
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : D533890</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 94.69
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : D533891</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2270.35
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 222		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>3267.23</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : D533893</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 31 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>98.74</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : D533894</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 14 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>3485.57</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : D533896</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6851.54</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 177.60
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : D533897</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 10.00
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Processing Fee	Category/Type	<b>Transaction ID : D533898</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 4347.28
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Fee	Category/Type	<b>Transaction ID : D533885</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4534.88
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 7,999,999 5235.01 <b>Transaction ID : D533886</b>
City Owings Mills State MD Zip Code 21117	Purpose of Disbursement Payroll Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 7,999,999 2068.97 <b>Transaction ID : D533887</b>
City Owings Mills State MD Zip Code 21117	Purpose of Disbursement Payroll Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 7,999,999 144.69 <b>Transaction ID : D533888</b>
City Owings Mills State MD Zip Code 21117	Purpose of Disbursement Payroll Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7448.67
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 222		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 02 / 2012

Amount of Each Disbursement this Period: 2100.00

Transaction ID : D533949

**B. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 26 / 2012

Amount of Each Disbursement this Period: 2275.00

Transaction ID : D533950

**C. PCMS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1050 17th St NW Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 05 / 2012

Amount of Each Disbursement this Period: 2005.27

Transaction ID : D533951

**SUBTOTAL** of Disbursements This Page (optional) ..... 6380.27

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 222		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 1050 17th St NW Ste 590		Amount of Each Disbursement this Period 2303.85 <b>Transaction ID : D533952</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Accounting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PCS Marketing Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 3173.16 <b>Transaction ID : D534073</b>
City Cincinnati State OH Zip Code 45241	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PCS Marketing Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 1676.28 <b>Transaction ID : D534074</b>
City Cincinnati State OH Zip Code 45241	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7153.29
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postmaster - NY BRM</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address Business Reply 100 Fisher Ave		Amount of Each Disbursement this Period 190.00 <b>Transaction ID : D533971</b>
City White Plains State NY Zip Code 10602-9995	Purpose of Disbursement Postage Permit Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 21.92 <b>Transaction ID : D534011</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 43.17 <b>Transaction ID : D534012</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.09
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELIJAH REICHLIN-MELNICK</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012	
Mailing Address 1 HAVEN CT Apt N3B			Amount of Each Disbursement this Period 72.45	
City NYACK	State NY	Zip Code 10960	Transaction ID : D534013	
Purpose of Disbursement Mileage Reimbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. ELIJAH REICHLIN-MELNICK</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012	
Mailing Address 1 HAVEN CT Apt N3B			Amount of Each Disbursement this Period 217.50	
City NYACK	State NY	Zip Code 10960	Transaction ID : D534014	
Purpose of Disbursement Office Supplies Reimbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ELIJAH REICHLIN-MELNICK</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012	
Mailing Address 1 HAVEN CT Apt N3B			Amount of Each Disbursement this Period 332.62	
City NYACK	State NY	Zip Code 10960	Transaction ID : D534015	
Purpose of Disbursement Office Supplies Reimbursement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	622.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 12.13 <b>Transaction ID : D534016</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Event Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 73.00 <b>Transaction ID : D534017</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : D534018</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 18.20 <b>Transaction ID : D534019</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 22.00 <b>Transaction ID : D534020</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Event Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ELIJAH REICHLIN-MELNICK</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 1 HAVEN CT Apt N3B		Amount of Each Disbursement this Period 39.12 <b>Transaction ID : D534021</b>
City NYACK State NY Zip Code 10960	Purpose of Disbursement Mileage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	79.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ELIJAH REICHLIN-MELNICK</b>			Date of Disbursement M M / D D / Y Y Y Y <b>09 / 17 / 2012</b>	
Mailing Address <b>1 HAVEN CT Apt N3B</b>			Amount of Each Disbursement this Period <b>28.28</b>	
City <b>NYACK</b>	State <b>NY</b>	Zip Code <b>10960</b>	Transaction ID : <b>D534022</b>	
Purpose of Disbursement <b>Office Supplies</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Reliable Office Equipment, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 10 / 2012</b>	
Mailing Address <b>162 Mt. Joy Pl</b>			Amount of Each Disbursement this Period <b>90.00</b>	
City <b>New Rochelle</b>	State <b>NY</b>	Zip Code <b>10801</b>	Transaction ID : <b>D534002</b>	
Purpose of Disbursement <b>Equipment Maintenance</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Route 304 Associates, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 09 / 2012</b>	
Mailing Address <b>475 Route 304</b>			Amount of Each Disbursement this Period <b>750.00</b>	
City <b>New City</b>	State <b>NY</b>	Zip Code <b>10956</b>	Transaction ID : <b>D534077</b>	
Purpose of Disbursement <b>Office Rent</b>		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>868.28</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2012
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 2921.09 <b>Transaction ID : D533960</b>
City Hagerstown	State MD	
Zip Code 21741	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2012
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 761.29 <b>Transaction ID : D533961</b>
City Hagerstown	State MD	
Zip Code 21741	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. TerraPath</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address PO BOX 270		Amount of Each Disbursement this Period 337.50 <b>Transaction ID : D533965</b>
City Larchmont	State NY	
Zip Code 10538	Purpose of Disbursement Computer Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4019.88
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 193 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Advocate</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2012	
Mailing Address 22 Main Street			Amount of Each Disbursement this Period 300.00	
City Monsey	State NY	Zip Code 10952	Transaction ID : D533869	
Purpose of Disbursement Journal Advertisement		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Frost Group</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012	
Mailing Address 3422 Porter Street, NW			Amount of Each Disbursement this Period 7000.00	
City Washington	State DC	Zip Code 20016	Transaction ID : D534027	
Purpose of Disbursement Fundraising Consulting Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. The Frost Group</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012	
Mailing Address 3422 Porter Street, NW			Amount of Each Disbursement this Period 7000.00	
City Washington	State DC	Zip Code 20016	Transaction ID : D534028	
Purpose of Disbursement Fundraising Consulting Services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Frost Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 3422 Porter Street, NW		Amount of Each Disbursement this Period 7000.00 <b>Transaction ID : D534029</b>
City Washington State DC Zip Code 20016	Purpose of Disbursement Fundraising Consulting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Jewish Press</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 338 Third Avenue		Amount of Each Disbursement this Period 308.00 <b>Transaction ID : D533858</b>
City Brooklyn State NY Zip Code 11215	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Winding Creek Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2852 Connecticut Ave, NW		Amount of Each Disbursement this Period 386.85 <b>Transaction ID : D533997</b>
City Washington State DC Zip Code 20008	Purpose of Disbursement Automated Phone Calls	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7694.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Town of Ramapo</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 237 Route 59		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D534080</b>
City Airmont	State NY	
Zip Code 10901	Purpose of Disbursement Sign Permit Deposit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Town of Stony Point</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 74 E. Main St.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D534081</b>
City Stony Point	State NY	
Zip Code 10980	Purpose of Disbursement Sign Permit Deposit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Twenty First Century Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 434 New Jersey Ave, SE		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : D533917</b>
City Washington,	State DC	
Zip Code 20003	Purpose of Disbursement Site Rental/Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Way of Westchester &amp; Putnam</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 16 / 2012</b>
Mailing Address <b>336 Central Park Ave</b>			Amount of Each Disbursement this Period <b>450.00</b> <b>Transaction ID : D534083</b>
City <b>White Plains</b>	State <b>NY</b>	Zip Code <b>10606</b>	
Purpose of Disbursement <b>Journal Advertisement</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y <b>07 / 30 / 2012</b>
Mailing Address <b>PO BOX 489</b>			Amount of Each Disbursement this Period <b>280.04</b> <b>Transaction ID : D533866</b>
City <b>Newark</b>	State <b>NJ</b>	Zip Code <b>07101</b>	
Purpose of Disbursement <b>Cell Phone Service</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y <b>08 / 26 / 2012</b>
Mailing Address <b>PO BOX 489</b>			Amount of Each Disbursement this Period <b>276.69</b> <b>Transaction ID : D533867</b>
City <b>Newark</b>	State <b>NJ</b>	Zip Code <b>07101</b>	
Purpose of Disbursement <b>Cell Phone Service</b>		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1006.73</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address PO BOX 489		Amount of Each Disbursement this Period 364.78
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Cell Phone Service		<b>Transaction ID : D533868</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 350 Granite Street		Amount of Each Disbursement this Period 1200.00
City Braintree	State MA Zip Code 02184	
Purpose of Disbursement Office Phone Expense		<b>Transaction ID : D533953</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2012
Mailing Address 350 Granite Street		Amount of Each Disbursement this Period 742.08
City Braintree	State MA Zip Code 02184	
Purpose of Disbursement Office Phone Expense		<b>Transaction ID : D533954</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2306.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>			Date of Disbursement MM / DD / YYYY 08 / 27 / 2012
Mailing Address 350 Granite Street			Amount of Each Disbursement this Period 975.11 <b>Transaction ID : D533955</b>
City Braintree	State MA	Zip Code 02184	
Purpose of Disbursement Office Phone Expense		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>			Date of Disbursement MM / DD / YYYY 09 / 27 / 2012
Mailing Address 350 Granite Street			Amount of Each Disbursement this Period 860.62 <b>Transaction ID : D533956</b>
City Braintree	State MA	Zip Code 02184	
Purpose of Disbursement Office Phone Expense		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>			Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address PO BOX 15124			Amount of Each Disbursement this Period 1028.26 <b>Transaction ID : D534084</b>
City Albany	State NY	Zip Code 12212	
Purpose of Disbursement Telephones		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2863.99
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address PO BOX 15124		Amount of Each Disbursement this Period 238.79 <b>Transaction ID : D534085</b>
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Telephones	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Village of Montebello</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1 Montebello Rd.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D534088</b>
City Montebello	State NY Zip Code 10901	
Purpose of Disbursement Sign Permit Deposit	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Village of Sloatsburg</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 96 Orange Turnpike		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : D534089</b>
City Sloatsburg	State NY Zip Code 10974	
Purpose of Disbursement Sign Permit Deposit	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	638.79
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Village of Sloatsburg</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 96 Orange Turnpike		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D534090</b>
City Sloatsburg	State NY	
Zip Code 10974	Purpose of Disbursement Sign Permit Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Westchester Community Opportunity Program</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 2269 Saw Mill River Road		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D533840</b>
City Elmsford	State NY	
Zip Code 10523	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Westchester Jewish Council</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 701 Westchester Ave, S		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D533998</b>
City White Plains	State NY	
Zip Code 10604	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

**A. Westchester-Putnam Counties AFL-CIO Centr**

Full Name (Last, First, Middle Initial)  
Mailing Address Central Labor Body 33 Oakland Ave

City Harrison State NY Zip Code 10528

Purpose of Disbursement Journal Advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 19 / 2012

Amount of Each Disbursement this Period: 200.00

Transaction ID : D533972

**B. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 19 / 2012

Amount of Each Disbursement this Period: 1899.06

Transaction ID : D533859

**C. AMTRAK**

Full Name (Last, First, Middle Initial)  
Mailing Address 60 Massachusetts Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 19 / 2012

Amount of Each Disbursement this Period: 693.00

Transaction ID : D533863

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 2099.06

**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)	PAGE 202 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T OneNet Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address PO Box 830017		Amount of Each Disbursement this Period 25.00
City Baltimore	State MD	Zip Code 21283-0017
Purpose of Disbursement Telecommunication Services	Category/ Type	
Candidate Name	Transaction ID : D533879	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Corner Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 1425 K St NW		Amount of Each Disbursement this Period 232.52
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Transaction ID : D534043	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>C. Cosi</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 1700 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 227.16
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Transaction ID : D533999	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 339 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 69.13
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Travel	Transaction ID : D533920
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilton Rye Town</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 699 Westchester Avenue		Amount of Each Disbursement this Period 100.00
City Rye Brook	State NY	
Zip Code 10573	Purpose of Disbursement Travel	Transaction ID : D533966
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Flatotel</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2012
Mailing Address 135 W 52nd St		Amount of Each Disbursement this Period 299.89
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Travel	Transaction ID : D534079
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 8356.14
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Credit Card Payment	Transaction ID : D533860
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Acqua AI 2</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 212 7th Street Southeast		Amount of Each Disbursement this Period 858.65
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering	Transaction ID : D534032
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 45.00
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Membership Fee	Transaction ID : D533861
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8356.14
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T OneNet Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO Box 830017		Amount of Each Disbursement this Period 25.00
City Baltimore	State MD	
Zip Code 21283-0017	Purpose of Disbursement Telecommunication Services	Transaction ID : D533880 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Atlanta Bread Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 220 Main St		Amount of Each Disbursement this Period 303.68
City White Plains	State NY	
Zip Code 10601	Purpose of Disbursement Catering	Transaction ID : D533962 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bistro Bis</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 16 E Street, NW		Amount of Each Disbursement this Period 68.09
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Catering Expense	Transaction ID : D533938 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cosi</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 1700 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 652.95
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Catering	Transaction ID : D534000
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 339 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 68.60
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Travel	Transaction ID : D533921
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period 100.41
City Memphis	State TN	
Zip Code 38101	Purpose of Disbursement Deliveries	Transaction ID : D533848
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Frohling Sign Company</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 419 E Route 59		Amount of Each Disbursement this Period 531.04
City Nanuet	State NY	
Zip Code 10954	Purpose of Disbursement	Transaction ID : D534050 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Greyston Bakery, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 104 Alexander Street		Amount of Each Disbursement this Period 840.00
City Yonkers	State NY	
Zip Code 10701	Purpose of Disbursement Catering	Transaction ID : D533905 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Harris Teeter</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 1350 Potomac Ave, SE		Amount of Each Disbursement this Period 271.04
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Event Supplies	Transaction ID : D533969 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hilton Rye Town</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 699 Westchester Avenue		Amount of Each Disbursement this Period 430.40
City Rye Brook	State NY	
Zip Code 10573	Purpose of Disbursement Event Catering	Transaction ID : D533967
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 500 Staples Dr.		Amount of Each Disbursement this Period 1478.11
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement Office Supplies	Transaction ID : D533983
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The City Bakery</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 3 West 18th Street		Amount of Each Disbursement this Period 587.92
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Catering	Transaction ID : D534078
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. USPS</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>27</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		27		2012
M M	/	D D	/	Y Y Y Y									
08		27		2012									
Mailing Address 620 Mamaroneck Ave		Amount of Each Disbursement this Period											
City State Zip Code White Plains NY 10605		<table border="1"> <tr> <td>1679.25</td> </tr> </table>		1679.25									
1679.25													
Purpose of Disbursement Postage		Transaction ID : D533937											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. American Express</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>10</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		10		2012
M M	/	D D	/	Y Y Y Y									
09		10		2012									
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period											
City State Zip Code Newark NJ 07101		<table border="1"> <tr> <td>1786.53</td> </tr> </table>		1786.53									
1786.53													
Purpose of Disbursement Credit Card Payment		Transaction ID : D533862											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. AMTRAK</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>10</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		10		2012
M M	/	D D	/	Y Y Y Y									
09		10		2012									
Mailing Address 60 Massachusetts Ave, NE		Amount of Each Disbursement this Period											
City State Zip Code Washington DC 20002		<table border="1"> <tr> <td>258.00</td> </tr> </table>		258.00									
258.00													
Purpose of Disbursement Travel		Transaction ID : D533864											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)													
State: District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1786.53
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 210 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T OneNet Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address PO Box 830017		Amount of Each Disbursement this Period 25.00
City Baltimore	State MD	Zip Code 21283-0017
Purpose of Disbursement Telecommunication Services	Category/ Type	
Candidate Name	Transaction ID : D533881	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cosi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1700 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 333.93
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Transaction ID : D534001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hotels.com</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 10440 North Central Expressway		Amount of Each Disbursement this Period 707.83
City Dallas	State TX	Zip Code 75231
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Transaction ID : D533924	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 211 OF 222	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 500 Staples Dr.		Amount of Each Disbursement this Period 215.88
City Framingham	State MA	
Zip Code 01702	Purpose of Disbursement Office Supplies	Transaction ID : D533984
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 5235.00
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll	Transaction ID : D533889
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 887.73
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Payroll	Transaction ID : D534159
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5235.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 2901.75
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Payroll	Transaction ID : D534160 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elijah Reichlin-Melnick</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2012
Mailing Address 26 Marion St.		Amount of Each Disbursement this Period 1445.52
City Nyack	State NY	
Zip Code 10960	Purpose of Disbursement Payroll	Transaction ID : D534158 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 6918.13
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll	Transaction ID : D533892
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6918.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Christine Yankou</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address 308 Walnut Place			Amount of Each Disbursement this Period 887.73	
City Syracuse	State NY	Zip Code 13210	Transaction ID : D534147	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>B. Henry de Koninck</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address 12 Central Ave			Amount of Each Disbursement this Period 2901.76	
City Montclair	State NJ	Zip Code 07042-2911	Transaction ID : D534144	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>c. Kelly Heaton</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012	
Mailing Address 3658 Upton St NW			Amount of Each Disbursement this Period 1683.12	
City Washington	State DC	Zip Code 20008	Transaction ID : D534145	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elijah Reichlin-Melnick</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address 26 Marion St.		Amount of Each Disbursement this Period 1445.52
City Nyack	State NY	
Zip Code 10960	Purpose of Disbursement Payroll	Transaction ID : D534146
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 8263.91
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll	Transaction ID : D533895
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 308 Walnut Place		Amount of Each Disbursement this Period 887.73
City Syracuse	State NY	
Zip Code 13210	Purpose of Disbursement Payroll	Transaction ID : D534152
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8263.91
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 2901.76
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Payroll	Transaction ID : D534148
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew Dennis</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 322 14th Street NE		Amount of Each Disbursement this Period 1553.87
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Payroll	Transaction ID : D534149
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kelly Heaton</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 3658 Upton St NW		Amount of Each Disbursement this Period 1475.03
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Payroll	Transaction ID : D534150
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elijah Reichlin-Melnick</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012	
Mailing Address 26 Marion St.			Amount of Each Disbursement this Period 1445.52	
City Nyack	State NY	Zip Code 10960	Transaction ID : D534151 <b>[MEMO ITEM]</b>	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012	
Mailing Address 100 Painters Mill Road PO Box 388			Amount of Each Disbursement this Period 8182.49	
City Owings Mills	State MD	Zip Code 21117	Transaction ID : D533899	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>c. Christine Yankou</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012	
Mailing Address 308 Walnut Place			Amount of Each Disbursement this Period 887.73	
City Syracuse	State NY	Zip Code 13210	Transaction ID : D534157 <b>[MEMO ITEM]</b>	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8182.49
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 222			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Henry de Koninck</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 12 Central Ave		Amount of Each Disbursement this Period 2901.76
City Montclair	State NJ	
Zip Code 07042-2911	Purpose of Disbursement Payroll	Transaction ID : D534153 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew Dennis</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 322 14th Street NE		Amount of Each Disbursement this Period 1553.87
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Payroll	Transaction ID : D534154 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kelly Heaton</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 3658 Upton St NW		Amount of Each Disbursement this Period 1393.61
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Payroll	Transaction ID : D534155 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 222			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Elijah Reichlin-Melnick</b>			Date of Disbursement M M / D D / Y Y Y Y <b>09 / 27 / 2012</b>	
Mailing Address <b>26 Marion St.</b>			Amount of Each Disbursement this Period <b>1445.52</b>	
City <b>Nyack</b>	State <b>NY</b>	Zip Code <b>10960</b>	Transaction ID : <b>D534156</b>	
Purpose of Disbursement <b>Payroll</b>		Category/ Type		
Candidate Name			<b>[MEMO ITEM]</b>	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>444001.28</b>

**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 219 OF 222			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 430 South Capitol Street SE			Amount of Each Disbursement this Period 10526.00 <b>Transaction ID : D534045</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Unlimited Transfer to a Party Committee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 430 South Capitol Street SE			Amount of Each Disbursement this Period 10526.00 <b>Transaction ID : D534046</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Unlimited Transfer to a Party Committee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Democratic Congressional Campaign Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 430 South Capitol Street SE			Amount of Each Disbursement this Period 10526.00 <b>Transaction ID : D534047</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Unlimited Transfer to a Party Committee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	31578.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 222
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Rochelle Democratic City Cmte</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 28 Trenor Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D533939</b>
City New Rochelle	State NY	
Zip Code 10804	Purpose of Disbursement Unlimited Transfer to a Party Committee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NEW YORK STATE DEMOCRATIC COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 60 MADISON AVENUE SUITE 1201		Amount of Each Disbursement this Period 10000.00 <b>Transaction ID : D534024</b>
City NEW YORK	State NY	
Zip Code 10010	Purpose of Disbursement Unlimited Transfer - Coordinated Campaign Activity	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. NEW YORK STATE DEMOCRATIC COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address 60 MADISON AVENUE SUITE 1201		Amount of Each Disbursement this Period 80000.00 <b>Transaction ID : D534025</b>
City NEW YORK	State NY	
Zip Code 10010	Purpose of Disbursement Unlimited Transfer - Coordinated Campaign Activity	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	181000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 222
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rockland County Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address PO Box 266		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D533919</b>
City New City	State NY	
Zip Code 10956	Purpose of Disbursement Transfer Excess Campaign Funds	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. WCLA</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address Westch Coalition Legal Abortion 237 Mamaroneck Avenue		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D533841</b>
City White Plains	State NY	
Zip Code 10605	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Westchester County Democratic Comm</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 170 East Post Road #210		Amount of Each Disbursement this Period 2150.00 <b>Transaction ID : D533856</b>
City White Plains	State NY	
Zip Code 10601	Purpose of Disbursement Unlimited Transfer to Party Committee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4150.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 222 OF 222	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Nita Lowey for Congress**

Full Name (Last, First, Middle Initial) <b>A. White Plains Democratic City Comm.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 02 / 2012</b>
Mailing Address 10 Franklin Avenue		Amount of Each Disbursement this Period <b>800.00</b>
City White Plains	State NY	
Zip Code 10601	Purpose of Disbursement Unlimited Transfer to Party Committee	<b>Transaction ID : D533857</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>217528.00</b>