

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NEW YORK CHOICE PAC II

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="36096.47"/>	<input type="text" value="36096.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26756.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13800.00"/>	<input type="text" value="29583.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="40556.21"/>	<input type="text" value="65680.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18350.00"/>	<input type="text" value="43474.16"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22206.21"/>	<input type="text" value="22206.21"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

NEW YORK CHOICE PAC II

Report Covering the Period: From: 07 / 01 / 2014 To: 09 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13000.00	28000.00
(ii) Unitemized	800.00	800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13800.00	28800.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13800.00	28800.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	783.90
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13800.00	29583.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13800.00	29583.90

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2850.00	9974.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2850.00	9974.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	33500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18350.00	43474.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18350.00	43474.16

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13800.00	28800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13800.00	28800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2850.00	9974.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	783.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2850.00	9190.26

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
NEW YORK CHOICE PAC II

Full Name (Last, First, Middle Initial)
A. Eleanor M. Alger

Mailing Address 19 East 72nd Street

City New York State NY Zip Code 10021

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

Name of Employer N/A Occupation homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.5284

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Phoebe Bender

Mailing Address 125 Euclid Avenue

City Albany State NY Zip Code 12203

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.5305

Amount of Each Receipt this Period
1000.00

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

Mailing Address 125 Euclid Avenue

City Albany State NY Zip Code 12203

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2014
Transaction ID : SA11AI.5300

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

A. Susan Cullman
 Full Name (Last, First, Middle Initial)
 Mailing Address 88 Saddle Rock Rd
 City Stamford State CT Zip Code 06902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014
Transaction ID : SA11AI.5307
 Amount of Each Receipt this Period
 1000.00

B. Barbara Fleishman
 Full Name (Last, First, Middle Initial)
 Mailing Address 870 United Nations Plaza
 City New York State NY Zip Code 10007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kennedy Galleries Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.5285
 Amount of Each Receipt this Period
 1000.00

C. Patricia F. Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 755 Park Avenue
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.5286
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

A. Clare Gregorian
Full Name (Last, First, Middle Initial)

Mailing Address 340 W. 57TH Street

City New York State NY Zip Code 10019

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

Name of Employer none Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
250.00

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

Mailing Address 1035 5th Avenue

City New York State NY Zip Code 19928

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : SA11AI.5287

Amount of Each Receipt this Period
250.00

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

Mailing Address 829 Park Avenue

City New York State NY Zip Code 10021

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

Name of Employer self Occupation public affairs consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.5302

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

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

Mailing Address 180 East End Avenue
22G

City State Zip Code
New York NM 10128

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Isabel Potter

Mailing Address 116 East 66th Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.5291

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Roberta Schneiderman

Mailing Address 203 East 72nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
none none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.5296

Amount of Each Receipt this Period
4000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

A. Linda Vance
 Full Name (Last, First, Middle Initial)
 Mailing Address 1049 Fifth Avenue
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 09 / 2014
Transaction ID : SA11AI.5312
 Amount of Each Receipt this Period
 250.00

B. Maria Vullo
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 West 77th Street
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Law Firm Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014
Transaction ID : SA11AI.5297
 Amount of Each Receipt this Period
 1000.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	13000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

Full Name (Last, First, Middle Initial)

A. Ms Carolyn Kamlet

Mailing Address 726 Beach Road

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : SB21B.5317

Amount of Each Disbursement this Period

950.00

Full Name (Last, First, Middle Initial)

B. Ms Carolyn Kamlet

Mailing Address 726 Beach Road

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SB21B.5318

Amount of Each Disbursement this Period

950.00

Full Name (Last, First, Middle Initial)

C. Ms Carolyn Kamlet

Mailing Address 726 Beach Road

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SB21B.5319

Amount of Each Disbursement this Period

950.00

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

2850.00

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

2850.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

Full Name (Last, First, Middle Initial)

A. AARON WOOLF FOR CONGRESS

Mailing Address PO BOX 248

City ELIZABETHTOWN State NY Zip Code 12932

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 21

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	24	/	2014

Transaction ID : SB23.5322

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Martha Robertson

Mailing Address P. O. Box 54

City Dryden NY 13053 State NY Zip Code 13053

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB23.5323

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends of Dan Maffei

Mailing Address PO Box 74

City Syracuse State NY Zip Code 13214

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 25

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB23.5327

Amount of Each Disbursement this Period

1000.00

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

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

5500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

Full Name (Last, First, Middle Initial)

A. Kathleen Rice for Congress

Mailing Address P.O. Box 744

City Mineola State NY Zip Code 11501

Purpose of Disbursement

Candidate Name
Kathleen Rice for Congress

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

Transaction ID : **SB23.5320**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. RECCHIA FOR CONGRESS

Mailing Address 172 GRAVESEND NECK ROAD

City BROOKLYN State NY Zip Code 11223

Purpose of Disbursement

Candidate Name
RECCHIA FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

Transaction ID : **SB23.5325**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Sean Eldridge for Congress

Mailing Address PO BOX 4113

City KINGSTON State NY Zip Code 12402

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2014

Transaction ID : **SB23.5324**

Amount of Each Disbursement this Period

2000.00

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW YORK CHOICE PAC II

Full Name (Last, First, Middle Initial)

A. Sean Patrick Maloney for Congress

Mailing Address P. O. Box 270

City State Zip Code

Newburgh

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB23.5326

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City State Zip Code

Farmingville

NY 11738

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : SB23.5328

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

3000.00

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

15500.00
