

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

FRIENDS OF JOHN LAFALCE

ADDRESS (number and street)
▼

625 Fairmont Avenue

☐Check if different
than previously
reported. (ACC)

North Tonawanda

NY

14120

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00025379

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

NY

29

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☒

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2011

through

06

30

2011

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

Ms Theresa Mary Opalinski

Signature of Treasurer

Electronically Filed by Ms Theresa Mary Opalinski

Date

07

10

2011

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

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

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

FRIENDS OF JOHN LAFALCE

Report Covering the Period:

From:

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

To:

M M
0 6D D
3 0Y Y Y Y
2 0 1 1

	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)).....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	29079.50	101367.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	29079.50	101367.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	347421.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

FRIENDS OF JOHN LAFALCE

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	1	1

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACS).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

0.00

0.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(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

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

398.94

15004.13

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

398.94

15004.13

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	29079.50	101367.75
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	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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	29079.50	101367.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	376102.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	398.94
25. SUBTOTAL (add Line 23 and Line 24).....	376501.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29079.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	347421.56

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 10

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JOHN LAFALCE**A.**Full Name (Last, First, Middle Initial)
HSBC

Mailing Address HSBC Center

City State Zip Code
Buffalo NY 14240FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6917.02

Date of Receipt

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

Transaction ID: SA15.10102

Amount of Each Receipt this Period

4.29

interest CD

B.Full Name (Last, First, Middle Initial)
HSBC

Mailing Address HSBC Center

City State Zip Code
Buffalo NY 14240FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6952.08

Date of Receipt

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

Transaction ID: SA15.10105

Amount of Each Receipt this Period

35.06

interest - CD

C.Full Name (Last, First, Middle Initial)
HSBC

Mailing Address HSBC Center

City State Zip Code
Buffalo NY 14240FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6956.23

Date of Receipt

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

Transaction ID: SA15.10103

Amount of Each Receipt this Period

4.15

interest - CD

SUBTOTAL of Receipts This Page (optional)

43.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JOHN LAFALCE

A.

Full Name (Last, First, Middle Initial)

HSBC

Mailing Address HSBC Center

City

Buffalo

State

NY

Zip Code

14240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6960.38

Date of Receipt

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

Transaction ID: SA15.10104

Amount of Each Receipt this Period

4.15

interest - CD

B.

Full Name (Last, First, Middle Initial)

HSBC

Mailing Address HSBC Center

City

Buffalo

State

NY

Zip Code

14240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6994.32

Date of Receipt

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

Transaction ID: SA15.10106

Amount of Each Receipt this Period

33.94

interest - CD

C.

Full Name (Last, First, Middle Initial)

HSBC

Mailing Address HSBC Center

City

Buffalo

State

NY

Zip Code

14240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7029.40

Date of Receipt

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

Transaction ID: SA15.10132

Amount of Each Receipt this Period

35.08

interest - CD

SUBTOTAL of Receipts This Page (optional)

73.17

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 10

(check only one)

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF JOHN LAFALCE

A.

Full Name (Last, First, Middle Initial)

Merril Lynch Ready Assets Trust

Mailing Address P.O. Box 45290

City

Jacksonville

State

FL

Zip Code

32232-5290

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2011

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

7974.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA15.10131

Amount of Each Receipt this Period

282.27

interest

SUBTOTAL of Receipts This Page (optional)

282.27

TOTAL This Period (last page this line number only)

398.94

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 FRIENDS OF JOHN LAFALCE

A. Full Name (Last, First, Middle Initial) Canisius High School Mailing Address 1180 Delaware Avenue	Transaction ID: SB17.10130 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 1 1</div> </div>
City Buffalo State NY Zip Code 14209 Purpose of Disbursement donation Candidate Name FRIENDS OF JOHN LAFALCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1000.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Citicards Mailing Address PO Box 6500 City Sioux Falls State SD Zip Code 57117 Purpose of Disbursement donations Candidate Name FRIENDS OF JOHN LAFALCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.10120 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 6 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>125.00</div>
C. Full Name (Last, First, Middle Initial) Citicards Mailing Address PO Box 6500 City Sioux Falls State SD Zip Code 57117 Purpose of Disbursement donations Candidate Name FRIENDS OF JOHN LAFALCE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.10125 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 1 1</div> </div> Amount of Each Disbursement this Period <div>579.50</div>
SUBTOTAL of Disbursements This Page (optional) ▶	<div>704.50</div>
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 FRIENDS OF JOHN LAFALCE

A. Full Name (Last, First, Middle Initial) Citicards	Transaction ID: SB17.10129 Date of Disbursement
Mailing Address PO Box 6500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 1 1</div> </div>
City State Zip Code Sioux Falls SD 57117	Amount of Each Disbursement this Period
Purpose of Disbursement donations	<div>1380.00</div>
Candidate Name FRIENDS OF JOHN LAFALCE	<div>012</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE - EXPENDITURES	Transaction ID: SB17.10124 Date of Disbursement
Mailing Address 430 S CAPITOL ST SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 1 1</div> </div>
City State Zip Code WASHINGTON DC 20003	Amount of Each Disbursement this Period
Purpose of Disbursement contribution	<div>25000.00</div>
Candidate Name FRIENDS OF JOHN LAFALCE	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Erie County Democratic Committee	Transaction ID: SB17.10126 Date of Disbursement
Mailing Address ellicott Sq. Bldg. Ste 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 1 1</div> </div>
City State Zip Code Buffalo NY 14203	Amount of Each Disbursement this Period
Purpose of Disbursement contribution	<div>500.00</div>
Candidate Name FRIENDS OF JOHN LAFALCE	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

26880.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF JOHN LAFALCE

A.

Full Name (Last, First, Middle Initial)
Sedita for D.A.

Mailing Address P.O. Box 473

City State Zip Code
Buffalo NY 14201

Purpose of Disbursement
contribution

Candidate Name
FRIENDS OF JOHN LAFALCE

Office Sought: ☒ House
☐ Senate
☐ President
State: NY District: 29

Disbursement For: 2011
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB17.10121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

28084.50