

A. Form/Schedule : **F3A**

Report is amended to include disbursement inadvertently omitted from original report.

Transaction ID :

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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)).....	127915.00	1825992.74
(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)).....	127915.00	1825992.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	167590.09	914631.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3089.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	167590.09	911542.63
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1443444.42	
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)

Write or Type Committee Name
Nita Lowey for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
2	5

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	82475.00	1507166.00
(i) Itemized (use Schedule A).....	12390.00	66303.00
(ii) Unitemized.....	94865.00	1573469.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	223.74
(b) Political Party Committees.....	33050.00	252300.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	127915.00	1825992.74
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
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	3089.35
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	182.44	9546.91
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	128097.44	1838629.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	167590.09	914631.98
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.....	78754.00	248122.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	246344.09	1162753.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1561691.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	128097.44
25. SUBTOTAL (add Line 23 and Line 24).....	1689788.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	246344.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1443444.42

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

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

FOR LINE NUMBER: PAGE 6 / 96
(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

<p>A. Full Name (Last, First, Middle Initial) Barry Alperin</p> <p>Mailing Address 875 Park Avenue Apt. 12D</p> <p>City State Zip Code New York NY 10021</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 08 / 25 / 2010</p> <p>Transaction ID: C18857532</p> <p>Amount of Each Receipt this Period 1000.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Robert Amler</p> <p>Mailing Address 19 Bradhurst Avenue Suite 2400</p> <p>City State Zip Code Hawthorne NY 10532</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation New York Medical College Physician</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 750.00</p>	<p>Date of Receipt 08 / 25 / 2010</p> <p>Transaction ID: C18857566</p> <p>Amount of Each Receipt this Period 750.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Peter Angelos</p> <p>Mailing Address One Charles Center 100 North Charles Street</p> <p>City State Zip Code Baltimore MD 21201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Law Offices of Peter G. Angelos Attorney</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 07 / 23 / 2010</p> <p>Transaction ID: C18750217</p> <p>Amount of Each Receipt this Period 1000.00</p>
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SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 96
(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)
Joseph Aresty

Mailing Address 1404 Flager Drive

City Mamaroneck State NY Zip Code 10543

FEC ID number of contributing federal political committee. C

Name of Employer Alfred Dunner Inc. Occupation Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2650.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18848674
 Amount of Each Receipt this Period 2150.00

B. Full Name (Last, First, Middle Initial)
Joseph Aresty

Mailing Address 1404 Flager Drive

City Mamaroneck State NY Zip Code 10543

FEC ID number of contributing federal political committee. C

Name of Employer Alfred Dunner Inc. Occupation Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2650.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18848675
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Rhonda Ashinoff

Mailing Address 22 Broadfield Road

City New Rochelle State NY Zip Code 10804

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2010
Transaction ID: C18853333
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 2650.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 96
(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)
David A. Barish

Mailing Address 38 DuPont Cir.

City State Zip Code
Sugar Land TX 77479

FEC ID number of contributing federal political committee. C

Name of Employer Chair King Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
07 / 29 / 2010

Transaction ID: C18754657

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Andrew Benerofe

Mailing Address 18 Cottage Avenue

City State Zip Code
Purchase NY 10577

FEC ID number of contributing federal political committee. C

Name of Employer Benerofe Properties Corp Occupation Real Estate Owner/Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853420

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Froma Benerofe

Mailing Address 18 Cottage Avenue

City State Zip Code
Purchase NY 10577

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Social Worker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853423

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 96
(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

<p>A. Full Name (Last, First, Middle Initial) Barry Berlin</p> <p>Mailing Address 54 Cardinal Drive</p> <p>City State Zip Code East Hills NY 11576</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 08 / 06 / 2010</p> <p>Transaction ID: C18796288</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Ruth Brause</p> <p>Mailing Address 21 Pryer Lane</p> <p>City State Zip Code Larchmont NY 10538-4020</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sutton and Whittemore Real Estate Occupation Realtor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt 08 / 04 / 2010</p> <p>Transaction ID: C18774393</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Lois T Bronz</p> <p>Mailing Address 282 Old Tarrytown Road</p> <p>City State Zip Code White Plains NY 10603</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Westchester County Occupation Legislator</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 08 / 10 / 2010</p> <p>Transaction ID: C18849533</p> <p>Amount of Each Receipt this Period 250.00</p>
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SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Lynne P. Brown

Mailing Address 29 Washington Square West #16E

City State Zip Code
New York NY 10011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
New York University University Administrator

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	8	/	2	0	1	0

Transaction ID: C18727961

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
William Cahn

Mailing Address 8 Thornewood Road

City State Zip Code
Armonk NY 10504

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
N/A Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	9	/	2	0	1	0

Transaction ID: C18848664

Amount of Each Receipt this Period
250.00

C.

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	1	0

Transaction ID: C18853481

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 96
(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)
Nancy Cardozo

Mailing Address 54 Brewster Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 12 / 2010
Transaction ID: C18850780
 Amount of Each Receipt this Period: 250.00

Election Cycle-to-Date: 450.00

B. Full Name (Last, First, Middle Initial)
Irving N. Claremon

Mailing Address 82 Rye Ridge Road

City State Zip Code
Harrison NY 10528

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

Name of Employer Self-Employed Occupation Realtor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 09 / 2010
Transaction ID: C18848673
 Amount of Each Receipt this Period: 1500.00

Election Cycle-to-Date: 3900.00

C. Full Name (Last, First, Middle Initial)
Irving N. Claremon

Mailing Address 82 Rye Ridge Road

City State Zip Code
Harrison NY 10528

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

Name of Employer Self-Employed Occupation Realtor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 09 / 2010
Transaction ID: C18848671
 Amount of Each Receipt this Period: 900.00

Election Cycle-to-Date: 3900.00

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 96
(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)
Robert A. Clarfeld

Mailing Address 53 Rosehill Ave.

City State Zip Code
Tarrytown NY 10591

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

Name of Employer
Clarfeld Financial Advisors

Occupation
Advisor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853352

B.

Full Name (Last, First, Middle Initial)
Bryn Cohen

Mailing Address 4 Birchall Drive

City State Zip Code
Scarsdale NY 10583

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

Name of Employer
Bryn Roberts Interiors

Occupation
President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2010

Transaction ID: C18753500

C.

Full Name (Last, First, Middle Initial)
Joan Cohen

Mailing Address 51 East Lake Drive

City State Zip Code
Katonah NY 10536

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

Name of Employer
Self-Employed

Occupation
Real Estate Management

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: C18857535

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Melissa Daniels		Date of Receipt
	Mailing Address 204 5th Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 16 / 2010
	City	State	Zip Code
	New Rochelle	NY	10801
	FEC ID number of contributing federal political committee. C		Transaction ID: C18853465
Name of Employer Ndoro Children's Charities		Occupation Trustee	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 350.00	

B.	Full Name (Last, First, Middle Initial) Joan Davidson		Date of Receipt
	Mailing Address 157 East 75th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 09 / 2010
	City	State	Zip Code
	New York	NY	10021
	FEC ID number of contributing federal political committee. C		Transaction ID: C18848659
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Gina DeFelice		Date of Receipt
	Mailing Address 16 Stonehedge Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 09 / 2010
	City	State	Zip Code
	West Nyack	NY	10994
	FEC ID number of contributing federal political committee. C		Transaction ID: C18848658
Name of Employer Cirens Arts Camp of Westchester		Occupation Instructor	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 96
(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)
Patricia N Dohrenwend

Mailing Address 60 Summit Avenue

City State Zip Code
Bronxville NY 10708

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

Name of Employer County of Westchester Occupation Director, Archives & Records Center

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853430

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Nicole Doliner

Mailing Address 13 Moreland Rd

City State Zip Code
New City NY 10956-4213

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: C18857515

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Wayne B Eisman

Mailing Address 70 Hampton Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer ENT & Allergy Associates Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 05 / 2010

Transaction ID: C18795589

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 96
(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)
Wilma Ellenbogen

Mailing Address 777 Pelham Road 2G

City State Zip Code
New Rochelle NY 10805

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Allied Converters Inc. Owner

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

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

Transaction ID: C18853393

Amount of Each Receipt this Period
750.00

Election Cycle-to-Date ▼ 950.00

B. Full Name (Last, First, Middle Initial)
Lindsay Farrell

Mailing Address 19 Davids Ln

City State Zip Code
Ossining NY 10562

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Open Door Family Medical Center Health Care

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

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 0 4 / 2 0 1 0

Transaction ID: C18795347

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Alfred Fields

Mailing Address 50 Brite Avenue

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Overseas Yarns Limited President

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

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 5 / 2 0 1 0

Transaction ID: C18857558

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 96
(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)
Julia Fishelson

Mailing Address 1630 Burbank Road

City State Zip Code
Wooster OH 44691

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 16 / 2010
Transaction ID: C18853063
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Donald Fitch

Mailing Address 20 Weyburn Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Center for Career Freedom Occupation Exec. Dir.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 07 / 19 / 2010
Transaction ID: C18750114
 Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Donald J. Fleishaker

Mailing Address 1 Haverford Ave.

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Self Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 09 / 2010
Transaction ID: C18848668
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 96
(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)
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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1425.00
Date of Receipt 07 / 28 / 2010
Transaction ID: C18752621
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
Richard E. French
Mailing Address 3 Willets Rd.
City Harrison State NY Zip Code 10528
FEC ID number of contributing federal political committee. **C**
Name of Employer Regional News Network Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 08 / 10 / 2010
Transaction ID: C18853404
Amount of Each Receipt this Period 2400.00

C. Full Name (Last, First, Middle Initial)
Robert 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 Friedland Realty Corp. Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 08 / 04 / 2010
Transaction ID: C18774387
Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 4475.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 96
(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)
Kristin Friedman

Mailing Address 28 Circle Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Parent Child Home Program Occupation Home Visitor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	1	0

Transaction ID: C18853468

Amount of Each Receipt this Period
250.00

350.00

B. Full Name (Last, First, Middle Initial)
Ross Frommer

Mailing Address 3260 Henry Hudson Parkway

City State Zip Code
Bronx NY 10463

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

Name of Employer Columbia University Occupation Government Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	9	/	2	0	1	0

Transaction ID: C18848657

Amount of Each Receipt this Period
250.00

500.00

C. Full Name (Last, First, Middle Initial)
Harriet Gamper

Mailing Address 41 Matthiessen Park

City State Zip Code
Irvington NY 10533

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

Transaction ID: C18857475

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 96
(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

<p>A. Full Name (Last, First, Middle Initial) Arthur Goldstein</p> <p>Mailing Address 940 Sylvan Lane</p> <p>City State Zip Code Mamaroneck NY 10543</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AGA Assoc. Occupation Investment Advisor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Date of Receipt 08 / 03 / 2010</p> <p>Transaction ID: C18773538</p> <p>Amount of Each Receipt this Period 250.00</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Cynthia Golub</p> <p>Mailing Address 710 Taylors Lane</p> <p>City State Zip Code Mamaroneck NY 10543</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Homemaker/Student</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4400.00</p>	<p>Date of Receipt 08 / 04 / 2010</p> <p>Transaction ID: C18774381</p> <p>Amount of Each Receipt this Period 400.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Cynthia Golub</p> <p>Mailing Address 710 Taylors Lane</p> <p>City State Zip Code Mamaroneck NY 10543</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Homemaker/Student</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4400.00</p>	<p>Date of Receipt 08 / 04 / 2010</p> <p>Transaction ID: C18774382</p> <p>Amount of Each Receipt this Period 2000.00</p>
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SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 21 / 96
(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)
Clare Gorman

Mailing Address 24 Bronx Street

City Tuckahoe State NY Zip Code 10707

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

Name of Employer Bronxville Schools Occupation Educator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2010
Transaction ID: C18773533
 Amount of Each Receipt this Period 350.00

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 Albert Einstein College of Medicine Occupation Psychologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18848665
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Fredric Gould

Mailing Address 60 Cuttermill Rd

City Great Neck State NY Zip Code 11021

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

Name of Employer REIT Exec Occupation Real Estate Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2010
Transaction ID: C18857536
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 96
(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)
Alison E Greene

Mailing Address 10 Richbell Road

City State Zip Code
White Plains NY 10605-4111

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

Name of Employer Occupation
New York State Senate Attorney

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

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: C18853362

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Carole Hankin

Mailing Address 4 Merion Drive

City State Zip Code
Purchase NY 10577

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

Name of Employer Occupation
WCC President

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

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: C18795615

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Peter Harckham

Mailing Address 277 Mount Holly Road

City State Zip Code
Katonah NY 10536

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

Name of Employer Occupation
Westchester County Elected Legislator

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

Date of Receipt
MM / DD / YYYY
08 / 07 / 2010

Transaction ID: C18848077

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 96
(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)
Barbara Hart

Mailing Address 44 Lounsbury Road

City State Zip Code
Croton-on-Hudson NY 10520

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

Name of Employer Occupation
Lowey, Dannenberg, Cohen & Hart Attorney

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

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: C18853403

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date: 2000.00

B. Full Name (Last, First, Middle Initial)
Terry Hartle

Mailing Address 519 Fort Williams Drive

City State Zip Code
Alexandria VA 22304

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

Name of Employer Occupation
American Council on Education Government Relations

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

Date of Receipt
MM / DD / YYYY
07 / 14 / 2010

Transaction ID: C18741404

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date: 250.00

C. Full Name (Last, First, Middle Initial)
Jean Heller

Mailing Address 3 Hidden Green Lane

City State Zip Code
Larchmont NY 10538

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

Name of Employer Occupation
Information Requested Information Requested

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

Date of Receipt
MM / DD / YYYY
08 / 09 / 2010

Transaction ID: C18848650

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date: 285.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 96 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Joy Henshel</p> <p>Mailing Address 24 Murray Hill Road</p> <p>City State Zip Code Scarsdale NY 10583</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p>Transaction ID: C18796326</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	6		2	0	1	0													
500.00																						

<p>B. Full Name (Last, First, Middle Initial) Ruth Hinerfeld</p> <p>Mailing Address 11 Oak Lane</p> <p>City State Zip Code Larchmont NY 10538</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p>Transaction ID: C18796189</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	5		2	0	1	0													
500.00																						

<p>C. Full Name (Last, First, Middle Initial) David S. Hoffner</p> <p>Mailing Address 72 Howell Ave.</p> <p>City State Zip Code Larchmont NY 10538</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Dechert LLP Attorney</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p>Transaction ID: C18853355</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	1	0	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	0		2	0	1	0													
250.00																						

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 96
(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)
Patty Horing

Mailing Address 17 Pryer Lane

City State Zip Code
Larchmont NY 10538

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 08 / 10 / 2010
Transaction ID: C18853390

Amount of Each Receipt this Period 2400.00

B. Full Name (Last, First, Middle Initial)
Gloria Batkin Kahn

Mailing Address 82 Pincrest Drive

City State Zip Code
Hastings-on-Hudson NY 10706

FEC ID number of contributing federal political committee. C

Name of Employer Westchester Psychological Assoc. Occupation Psychologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 04 / 2010
Transaction ID: C18774384

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Farooq Kathwari

Mailing Address Premium Point

City State Zip Code
New Rochelle NY 10801

FEC ID number of contributing federal political committee. C

Name of Employer Ethan Allen Occupation Chairman and CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 08 / 16 / 2010
Transaction ID: C18853067

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) 3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Farooq Kathwari

Mailing Address Premium Point

City State Zip Code
New Rochelle NY 10801

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

Name of Employer Occupation
Ethan Allen Chairman and CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 6 / 2 0 1 0

Transaction ID: C18853068

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)
Richard H. Kaufman

Mailing Address 119 Haviland Road

City State Zip Code
Harrison NY 10528

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

Name of Employer Occupation
Self Employed Economist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: C18853398

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Rosalind Kaufman

Mailing Address 119 Haviland Road

City State Zip Code
Harrison NY 10528

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

Name of Employer Occupation
The Jacob Fuchsberg Law Firm Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 1 0

Transaction ID: C18773515

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 96
(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)
Bernadette Kingham-Bez
 Mailing Address 10 Overdale Rd.
 City Rye State NY Zip Code 10580
 Date of Receipt 08 / 04 / 2010
Transaction ID: C18774335
 Amount of Each Receipt this Period 450.00
 FEC ID number of contributing federal political committee. C
 Name of Employer St. Vincent's Hospital Occupation Executive Director
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 450.00

B. Full Name (Last, First, Middle Initial)
Garry Klein
 Mailing Address 20 Robinhood Road
 City White Plains State NY Zip Code 10605
 Date of Receipt 07 / 15 / 2010
Transaction ID: C18747801
 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: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Gjergj Klimi
 Mailing Address 61-51 Dry Harbor Rd. J58
 City Middle Village State NY Zip Code 11379
 Date of Receipt 08 / 09 / 2010
Transaction ID: C18849547
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NYC College of Technology Occupation Faculty
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 96
(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)
Susan Klugman Gorobetz

Mailing Address 25 Circle Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Montefiore Medical Center Physician

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

Date of Receipt
MM / DD / YYYY
08 / 25 / 2010

Transaction ID: C18857556

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ernest Kneuer

Mailing Address 126 Halstead Avenue

City State Zip Code
Harrison NY 10528

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

Name of Employer Occupation
Self Proprietor

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

Date of Receipt
MM / DD / YYYY
08 / 02 / 2010

Transaction ID: C18773432

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Leo L. Kornfeld

Mailing Address 4 Turf Ave.

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
Exeter Group Consultant

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

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: C18853415

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 96
(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)
Van Krikorian

Mailing Address 5 Frederick Court

City Harrison State NY Zip Code 10528

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

Name of Employer Global Gold Corporation Occupation CEO/Counsel

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18849321
 Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Lynn Kroll

Mailing Address 18 Parsonage Point

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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 25 / 2010
Transaction ID: C18860366
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Theresa Kump Leghorn

Mailing Address 207 Wellington Avenue

City New Rochelle State NY Zip Code 10804

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

Name of Employer New Rochelle Fund for Educational Exce Occupation Museum Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18848655
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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(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)
Patricia Lanza

Mailing Address 32 Lake Shore Drive

City State Zip Code
Eastchester NY 10709

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

Name of Employer Retired Occupation Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	5	/	2	0	1	0

Transaction ID: C18795599

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Alexandra Lebenthal

Mailing Address 17 East 96th Street

City State Zip Code
New York NY 10128

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

Name of Employer Lebenthal & Company, Inc. Occupation President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	0

Transaction ID: C18773521

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Patricia T. Levine

Mailing Address 720 Milton Rd.

City State Zip Code
Rye NY 10580

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: C18853328

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 96
(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)
Barry Levy

Mailing Address 9445 Reach Road

City Potomac State MD Zip Code 20854

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

Name of Employer USIS Occupation VP for Government Affairs

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 07 / 30 / 2010
Transaction ID: C18753450
 Amount of Each Receipt this Period 2400.00

B. Full Name (Last, First, Middle Initial)
Matthew Lifflander

Mailing Address 7 Pond Lane

City Hastings-on-Hudson State NY Zip Code 10706

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

Name of Employer Lifflander & Rich Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 08 / 10 / 2010
Transaction ID: C18853417
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Carmen Linero

Mailing Address 3 Pheasant Drive

City Rye State NY Zip Code 10580

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

Name of Employer Suzi Oppenheimer for State Senate Occupation Intern

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2010
Transaction ID: C18849403
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 96
(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)
Arnold I. Linhardt

Mailing Address 462 California Road

City State Zip Code
Bronxville NY 10708

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

Name of Employer Strategic Services, Inc. Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 10 / 2010

Transaction ID: C18853344

Amount of Each Receipt this Period
250.00

B. 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 N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 21 / 2010

Transaction ID: C18747798

Amount of Each Receipt this Period
200.00

C. 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 N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 25 / 2010

Transaction ID: C18857531

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 33 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Anthony Mahler	Date of Receipt MM / DD / YYYY 08 / 05 / 2010
	Mailing Address 4661 Palisade Ave.	Transaction ID: C18795632
	City State Zip Code Bronx NY 10471	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Westchester Medical Center Occupation: SVP Strategic Planning Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Erin Malloy	Date of Receipt MM / DD / YYYY 07 / 28 / 2010
	Mailing Address 35 Riverview Rd	Transaction ID: C18751856
	City State Zip Code Irvington NY 10533	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: opengate, inc Occupation: director of development Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Paul Margolis	Date of Receipt MM / DD / YYYY 08 / 09 / 2010
	Mailing Address 36 Devonshire Drive	Transaction ID: C18849545
	City State Zip Code White Plains NY 10605	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Crain Communications Occupation: Publishing Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 34 / 96
(check only one)
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 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)
Elaine Merians

Mailing Address 10 Bonnie Briar Lane

City Larchmont State NY Zip Code 10538

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2010
Transaction ID: C18795618
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Edith Meyers

Mailing Address 47 Brookridge Road

City New Rochelle State NY Zip Code 10804

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: C18774395
 Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Vivian Milstein

Mailing Address 20 Heathcote Rd.

City Scarsdale State NY Zip Code 10583

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 08 / 06 / 2010
Transaction ID: C18796305
 Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 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)
Mark Mlotek

Mailing Address 160 Mildred Parkway

City State Zip Code
New Rochelle NY 10804

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

Name of Employer Occupation
Henry Schein, Inc. EVP

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

Date of Receipt
MM / DD / YYYY
08 / 06 / 2010

Transaction ID: C18847988

Amount of Each Receipt this Period
500.00

1500.00

B.

Full Name (Last, First, Middle Initial)
Walter Montgomery

Mailing Address 98 Fargo Lane

City State Zip Code
Irvington NY 10533

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

Name of Employer Occupation
Robinson Lerer & Montgomery Communications

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

Date of Receipt
MM / DD / YYYY
07 / 01 / 2010

Transaction ID: C18714723

Amount of Each Receipt this Period
1000.00

1000.00

C.

Full Name (Last, First, Middle Initial)
Mark M Murray

Mailing Address 6511 Princeton Dr.

City State Zip Code
Alexandria VA 22307

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

Name of Employer Occupation
Cornerstone Government Affairs Vice President

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

Date of Receipt
MM / DD / YYYY
08 / 09 / 2010

Transaction ID: C18848670

Amount of Each Receipt this Period
500.00

1500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(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

<p>A. Full Name (Last, First, Middle Initial) Judith Myers</p> <p>Mailing Address 257 Barnard Road</p> <p>City State Zip Code Larchmont NY 10538</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Westchester County Board of Legislator</p> <p>Occupation County Legislator</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Date of Receipt 08 / 03 / 2010</p> <p>Transaction ID: C18773528</p> <p>Amount of Each Receipt this Period 350.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Martha Nierenberg</p> <p>Mailing Address 15 Middle Patent Rd.</p> <p>City State Zip Code Armonk NY 10504-2803</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2250.00</p>	<p>Date of Receipt 08 / 09 / 2010</p> <p>Transaction ID: C18848654</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Anne Kauffman Nolon</p> <p>Mailing Address 108 Cobb Lane</p> <p>City State Zip Code Tarrytown NY 10591-3006</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Hudson River HealthCare</p> <p>Occupation Health Care Executive</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 08 / 04 / 2010</p> <p>Transaction ID: C18774346</p> <p>Amount of Each Receipt this Period 250.00</p>
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SUBTOTAL of Receipts This Page (optional)	1600.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 37 / 96
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 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)
John Nolon

Mailing Address 108 Cobb Lane

City State Zip Code
Tarrytown NY 10591-3006

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

Name of Employer Occupation
Pace University School of Law Professor

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

Date of Receipt
MM / DD / YYYY
08 / 04 / 2010

Transaction ID: C18774345

Amount of Each Receipt this Period
250.00

500.00

B.

Full Name (Last, First, Middle Initial)
Evan M. Novenstein

Mailing Address 8720 Harness Trl.

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
Wilco Co General Counsel

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

Date of Receipt
MM / DD / YYYY
07 / 29 / 2010

Transaction ID: C18754658

Amount of Each Receipt this Period
250.00

250.00

C.

Full Name (Last, First, Middle Initial)
Pauline C Oliva

Mailing Address 11 Partridge 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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: C18853317

Amount of Each Receipt this Period
100.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 38 / 96
(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)
Suzi Oppenheimer
Mailing Address 400 Claflin Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer State Senate Occupation Senator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt: 07 / 07 / 2010
Transaction ID: C18862954
 Amount of Each Receipt this Period: -100.00

Stop payment on duplicate check

B. Full Name (Last, First, Middle Initial)
Suzi Oppenheimer
Mailing Address 400 Claflin Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer State Senate Occupation Senator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt: 07 / 07 / 2010
Transaction ID: C18862953
 Amount of Each Receipt this Period: -2400.00

Stop payment on duplicate check

C. Full Name (Last, First, Middle Initial)
Alan J Patricof
Mailing Address 830 Park Avenue #11C

City New York State NY Zip Code 10021

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

Name of Employer Patricof & Company Ventures Inc. Occupation Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 07 / 21 / 2010
Transaction ID: C18747868
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **-1500.00**

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Terry Peel

Mailing Address 6109 Wynnwood Road

City State Zip Code
Bethesda MD 20816

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

Name of Employer
Edinston, Peel & Associates

Occupation
Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 28 / 2010

Transaction ID: C18752622

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Stephen Piccolo, Jr.

Mailing Address 27 Bloomer Rd.

City State Zip Code
Ridgefield CT 06877

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

Name of Employer
New York Medical College

Occupation
Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853325

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Ronald F. Poe

Mailing Address 3 Carpenter Way

City State Zip Code
Armonk NY 10504

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

Name of Employer
Ronald F. Poe & Associates

Occupation
President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853288

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 96
(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)
Andrea R Potash

Mailing Address 950 Sylvan Lane

City State Zip Code
Mamaroneck NY 10543

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

Name of Employer Occupation
Distinguished Programs Group Insurance

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

Date of Receipt
MM / DD / YYYY
07 / 14 / 2010

Transaction ID: C18741415

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Miriam Raphael

Mailing Address 9 Reunion Road

City State Zip Code
Rye Brook NY 10573

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

Name of Employer Occupation
N/A Retired

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

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: C18795645

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Karina E. Ringeisen

Mailing Address 43 Prospect Ave.

City State Zip Code
Tarrytown NY 10591

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

Name of Employer Occupation
Tarrytown Music Hall Manager

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

Date of Receipt
MM / DD / YYYY
08 / 10 / 2010

Transaction ID: C18853349

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 96
(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)
Dorothy B Roer

Mailing Address 50 Doral Greens Dr. West

City State Zip Code
Port Chester NY 10573

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

Name of Employer Self-Employed Occupation
Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 05 / 2010

Transaction ID: C18795626

Amount of Each Receipt this Period
500.00

1000.00

B. 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 Advanced Hypnosis Center Occupation
CMH

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853313

Amount of Each Receipt this Period
200.00

250.00

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

Mailing Address 4 East 89th #7E

City State Zip Code
New York NY 10128

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

Name of Employer edge wealth Occupation
financial advisor

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 24 / 2010

Transaction ID: C18857466

Amount of Each Receipt this Period
400.00

4400.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 96
(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)
Brett Rosen

Mailing Address 4 East 89th #7E

City State Zip Code
New York NY 10128

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

Name of Employer edge wealth Occupation financial advisor

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 24 / 2010

Transaction ID: C18856994

Amount of Each Receipt this Period
2000.00

4400.00

B. Full Name (Last, First, Middle Initial)
Philip Rosen

Mailing Address 75 Echo Bay Drive

City State Zip Code
New Rochelle NY 10805

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

Name of Employer Rosen Development Group, Inc. Occupation President

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 09 / 2010

Transaction ID: C18848676

Amount of Each Receipt this Period
1000.00

2000.00

C. Full Name (Last, First, Middle Initial)
Louise Rosenfeld

Mailing Address 301 Roaring Brook Road

City State Zip Code
Chappaqua NY 10514

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

Name of Employer N/A Occupation Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 04 / 2010

Transaction ID: C18774341

Amount of Each Receipt this Period
350.00

350.00

SUBTOTAL of Receipts This Page (optional) ► **3350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 96
(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)
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: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 25 / 2010

Transaction ID: C18750729

Amount of Each Receipt this Period
500.00

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

Date of Receipt
MM / DD / YYYY
08 / 04 / 2010

Transaction ID: C18774399

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Elizabeth Safian

Mailing Address 239 East 79th Street, Apt. 13H

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Sheldon Lobel, P.C. Attorney

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

Date of Receipt
MM / DD / YYYY
08 / 03 / 2010

Transaction ID: C18774010

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 44 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Keith F. Safian	Date of Receipt MM / DD / YYYY 08 / 03 / 2010
	Mailing Address 16 Brokaw Lane	Transaction ID: C18774014
	City State Zip Code Great Neck NY 11023	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Phelps Memorial Hospital Center Hospital Administrator Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3400.00	

B.	Full Name (Last, First, Middle Initial) Bruce Jordan Schanzer	Date of Receipt MM / DD / YYYY 07 / 12 / 2010
	Mailing Address 22 Bayeau Rd	Transaction ID: C18862957
	City State Zip Code New Rochelle NY 10804	Amount of Each Receipt this Period -1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Goldman Sachs Vice President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 0.00	Insufficient Funds

C.	Full Name (Last, First, Middle Initial) Nancy Seligson	Date of Receipt MM / DD / YYYY 08 / 03 / 2010
	Mailing Address 7 Douglas Lane	Transaction ID: C18774008
	City State Zip Code Larchmont NY 10538	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Mamaroneck Town Council Councilwoman Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 96
(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)
Alfred Shasha

Mailing Address 15 Cotswold Way

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: C18796302

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dinakar Singh

Mailing Address 1 Central Park South
Apartment 1107

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
TPG-AXON Capital CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C18856664

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
Dinakar Singh

Mailing Address 1 Central Park South
Apartment 1107

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
TPG-AXON Capital CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 1 0

Transaction ID: C18857464

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 96
(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)
Stephen J. Slade
Mailing Address 444 North Capitol St NW. Ste 841
City Washington State DC Zip Code 20001
FEC ID number of contributing federal political committee. **C**
Name of Employer Davidoff Malito & Hutcher LLP Occupation Director, Government Relations
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2000.00
Date of Receipt 07 / 01 / 2010
Transaction ID: C18715273
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Joseph Slakas
Mailing Address 44 Lounsbury Road
City Croton-on-Hudson State NY Zip Code 10520
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Art Dealer
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
3400.00
Date of Receipt 08 / 16 / 2010
Transaction ID: C18853458
Amount of Each Receipt this Period 1400.00

C. Full Name (Last, First, Middle Initial)
Joseph Slakas
Mailing Address 44 Lounsbury Road
City Croton-on-Hudson State NY Zip Code 10520
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Art Dealer
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
3400.00
Date of Receipt 08 / 16 / 2010
Transaction ID: C18853459
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2900.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 96
(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)
Bonnie Stapleton

Mailing Address 1 Scarsdale Rd Apt 202

City State Zip Code
Tuckahoe NY 10707

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

Name of Employer Occupation
Independent Contractor Realtor

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

Date of Receipt
MM / DD / YYYY
07 / 29 / 2010

Transaction ID: C18752657

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
C. Jeffery Stein

Mailing Address 92 Penn Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
MM / DD / YYYY
08 / 06 / 2010

Transaction ID: C18796303

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Richard Stein

Mailing Address 40 Woodlands Avenue

City State Zip Code
White Plains NY 10607

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

Name of Employer Occupation
Sunny-Oswego Student

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

Date of Receipt
MM / DD / YYYY
07 / 29 / 2010

Transaction ID: C18752584

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
harriet Kaplan suvall

Mailing Address 51 starr terrace

City State Zip Code
new rochelle NY 10804

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

Name of Employer Occupation
none none

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	0

Transaction ID: C18854831

Amount of Each Receipt this Period

750.00									
--------	--	--	--	--	--	--	--	--	--

B.

Full Name (Last, First, Middle Initial)
Francine Tancer

Mailing Address 27 Doral Greens Drive West

City State Zip Code
Rye Brook NY 10573

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

Name of Employer Occupation
Tancer & Two Company Jeweler

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	0

Transaction ID: C18848647

Amount of Each Receipt this Period

250.00									
--------	--	--	--	--	--	--	--	--	--

C.

Full Name (Last, First, Middle Initial)
Francine Tancer

Mailing Address 27 Doral Greens Drive West

City State Zip Code
Rye Brook NY 10573

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

Name of Employer Occupation
Tancer & Two Company Jeweler

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	0

Transaction ID: C18848648

Amount of Each Receipt this Period

100.00									
--------	--	--	--	--	--	--	--	--	--

SUBTOTAL of Receipts This Page (optional)

1100.00									
---------	--	--	--	--	--	--	--	--	--

TOTAL This Period (last page this line number only)

--	--	--	--	--	--	--	--	--	--

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 96
(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)
Alice Tenney
Mailing Address 42 Country Rd.
City Mamaroneck State NY Zip Code 10543
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
Amount of Each Receipt this Period 250.00
Date of Receipt 08 / 05 / 2010
Transaction ID: C18795653

B. Full Name (Last, First, Middle Initial)
Judy E. Tenney
Mailing Address 845 Forest Avenue
City Rye State NY Zip Code 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
Amount of Each Receipt this Period 2250.00
Date of Receipt 08 / 05 / 2010
Transaction ID: C18795601

C. Full Name (Last, First, Middle Initial)
Judy E. Tenney
Mailing Address 845 Forest Avenue
City Rye State NY Zip Code 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
Amount of Each Receipt this Period 2250.00
Date of Receipt 08 / 10 / 2010
Transaction ID: C18853391

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Susan A. Van Dolsen		Date of Receipt
	Mailing Address 29 Highland Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 03 / 2010
	City	State	Zip Code
	Rye	NY	10580
	FEC ID number of contributing federal political committee.		Transaction ID: C18773548
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Homemaker		Occupation Homemaker	<input type="text"/> 250.00
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Linda Viertel		Date of Receipt
	Mailing Address 8 Gracemere		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 16 / 2010
	City	State	Zip Code
	Tarrytown	NY	10591
	FEC ID number of contributing federal political committee.		Transaction ID: C18853461
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer N/A		Occupation Homemaker	<input type="text"/> 100.00
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 600.00

C.	Full Name (Last, First, Middle Initial) Marcia Warner		Date of Receipt
	Mailing Address 1015 Nautilus Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 06 / 2010
	City	State	Zip Code
	Mamaroneck	NY	10543
	FEC ID number of contributing federal political committee.		Transaction ID: C18796323
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer sacklerschool		Occupation executive	<input type="text"/> 1000.00
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1350.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) James Weinberg		Date of Receipt
	Mailing Address 42 Winfield Avenue		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Harrison	NY	10528
	FEC ID number of contributing federal political committee. C		Transaction ID: C18857533
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="2000.00"/>	

B.	Full Name (Last, First, Middle Initial) Joelle Weiss		Date of Receipt
	Mailing Address 42 Wyndham Close		<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	White Plains	NY	10605
	FEC ID number of contributing federal political committee. C		Transaction ID: C18773561
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

C.	Full Name (Last, First, Middle Initial) Karen A. Wexler		Date of Receipt
	Mailing Address 1148 Fifth Avenue		<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	New York	NY	10128
	FEC ID number of contributing federal political committee. C		Transaction ID: C18853307
Name of Employer Columbia		Occupation Psychologist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 52 / 96
(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)
Pamela Wexler

Mailing Address 15 Hillview Drive

City State Zip Code
Scarsdale NY 10583

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

Name of Employer N/A Occupation Community Volunteer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 1 0

Transaction ID: C18778367

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Richard G Wishnie

Mailing Address 95 Apple Lane

City State Zip Code
Briarcliff Manor NY 10510

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

Name of Employer Joint Industry Board of the Electrical Occupation Assistant to the Chairman of the Board

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C18853303

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Timothy Yates

Mailing Address 115 Beverly Road

City State Zip Code
Rye NY 10580

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

Name of Employer Shearman and Sterling Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: C18848651

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 96
(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)
Fredric R. Yerman

Mailing Address 31 Sheridan Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Kaye Scholer LLP Attorney

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2010

Transaction ID: C18853332

Amount of Each Receipt this Period
250.00

2250.00

B. Full Name (Last, First, Middle Initial)
Robert Martin Company, LLC

Mailing Address 100 Clearbrook Road

City State Zip Code
Elmsford NY 10523

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

Name of Employer Occupation

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2010

Transaction ID: C18773544

Amount of Each Receipt this Period
250.00

250.00

LLC - Members below if it-
emized. Permissible funds.

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

Mailing Address Robert Martin Company
100 Clearbrook Road

City State Zip Code
Elmsford NY 10523

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

Name of Employer Occupation
Robert Martin Company Real Estate

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 03 / 2010

Transaction ID: C18773546

Amount of Each Receipt this Period
250.00

1250.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional) ► **500.00**

TOTAL This Period (last page this line number only) ► **82475.00**

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

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

FOR LINE NUMBER: PAGE 54 / 96
(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)
ACRE
Mailing Address Action Comm For Rural Electric
4310 Wilson Boulevard
City Arlington State VA Zip Code 22203
FEC ID number of contributing federal political committee. **C** C00002972
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 08 / 05 / 2010
Transaction ID: C18795603
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
American Academy of Pediatric Dentistry PAC
Mailing Address 211 East Chicago Avenue, Suite 700
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C** C00365965
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 08 / 10 / 2010
Transaction ID: C18853453
Amount of Each Receipt this Period 4000.00

C. 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: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt 07 / 28 / 2010
Transaction ID: C18752624
Amount of Each Receipt this Period 3000.00

SUBTOTAL of Receipts This Page (optional) ► 8000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 96
(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)
American Dental Political Action Committee
Mailing Address 1111 14th Street NW #1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5500.00

Date of Receipt

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

Transaction ID: C18853454
 Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
American Federation of Teachers Committee on Polit
Mailing Address 555 New Jersey Avenue NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	1	0

Transaction ID: C18774366
 Amount of Each Receipt this Period
 3000.00

C. Full Name (Last, First, Middle Initial)
American Hospital Association Political Action Com
Mailing Address 325 Seventh Street NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

Transaction ID: C18857550
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional) ► **7500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 96
(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)
Association of Government Guaranteed Lenders PAC

Mailing Address POST OFFICE BOX 332

City State Zip Code
STILLWATER OK 74076

FEC ID number of contributing federal political committee. **C** C00241000

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2010

Transaction ID: C18750147

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Bramson for Mayor

Mailing Address 201 Pinebrook Blvd

City State Zip Code
New Rochelle NY 10804

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: C18857541

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CWA COPE PCC

Mailing Address 501 Third Street NW #1073

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: C18857546

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

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

FOR LINE NUMBER: PAGE 57 / 96
(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)
Friends of Reese Berman
Mailing Address 3 Locust Lane
City Armonk State NY Zip Code 10504
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 200.00
Date of Receipt 07 / 08 / 2010
Transaction ID: C18728008
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Harrison Democratic Committee
Mailing Address PO BOX 686
City Harrison State NY Zip Code 10528
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 07 / 30 / 2010
Transaction ID: C18753610
Amount of Each Receipt this Period 250.00

C. 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: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 08 / 10 / 2010
Transaction ID: C18853452
Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 58 / 96
(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)
NAPUS PAC for Postmasters
Mailing Address 8 Herbert Street

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing federal political committee. **C** C00100404

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 1 0
Transaction ID: C18795602
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC
Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 5 / 2 0 1 0
Transaction ID: C18857548
 Amount of Each Receipt this Period
 3000.00

C. Full Name (Last, First, Middle Initial)
NELSON, MULLINS, RILEY & SCARBOROUGH FEDERAL POLIT
Mailing Address 1320 MAIN STREET, 17TH FLOOR
PO BOX 11070

City State Zip Code
COLUMBIA SC 29201

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 4 / 2 0 1 0
Transaction ID: C18741416
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 96
(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)
North Castle Democratic Committee

Mailing Address 103 Old Hickory Way

City Bedford State NY Zip Code 10506

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 25 / 2010
Transaction ID: C18857581
 Amount of Each Receipt this Period: 100.00

B. 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: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 25 / 2010
Transaction ID: C18857547
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Ossining Democratic Committee

Mailing Address 9 Stonegate Road

City Ossining State NY Zip Code 10562

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 10 / 2010
Transaction ID: C18853450
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 96
(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)
Treasury Employees Political Action Committee
Mailing Address 1750 H Street, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 3 / 2 0 1 0
Transaction ID: C18773519
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITIC
Mailing Address 1300 L Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 6 / 2 0 1 0
Transaction ID: C18860394
 Amount of Each Receipt this Period
 4000.00

* Earmarked Contribution:
See Below

C. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee
Mailing Address 430 South Capitol Street

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 5 / 2 0 1 0
Transaction ID: C18860394B
 Amount of Each Receipt this Period
 4000.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional) ► 5000.00

TOTAL This Period (last page this line number only) ► 33050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 / 96
	(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)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial) Bank of America, NA		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2010
Mailing Address 730 15th St NW		Transaction ID: C18862836
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.60
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7514.38	

B.

Full Name (Last, First, Middle Initial) Citibank, N.A.		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2010
Mailing Address PO Box 5870		Transaction ID: C18862837
City New York	State NY	Zip Code 10163
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 116.84
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2032.53	

SUBTOTAL of Receipts This Page (optional)	▶	182.44
TOTAL This Period (last page this line number only)	▶	182.44

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423821</p> <p>Date of Disbursement 07 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 4.95</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423827</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 640.11</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423888</p> <p>Date of Disbursement 08 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 517.44</p>

SUBTOTAL of Disbursements This Page (optional)	1162.50
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
American Express

Transaction ID: D423893

Date of Disbursement

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

Mailing Address PO BOX 1270

Amount of Each Disbursement this Period

1674.82

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Credit Card Payment

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Anthony Novelli

Transaction ID: D423865

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	1	0

Mailing Address 860 Tuckahoe Rd, Apt 21A

Amount of Each Disbursement this Period

560.00

City Yonkers State NY Zip Code 10710

Purpose of Disbursement
Canvassing Services

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Wilson Baldwin

Transaction ID: D423873

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	0

Mailing Address 516 University Ave

Amount of Each Disbursement this Period

1002.15

City Ithaca State NY Zip Code 14850

Purpose of Disbursement
Payroll

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3236.97

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Wilson Baldwin <hr/> Mailing Address 516 University Ave <hr/> City Ithaca State NY Zip Code 14850 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	Transaction ID: D423838 Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2010
	Amount of Each Disbursement this Period 2004.31
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Wilson Baldwin <hr/> Mailing Address 516 University Ave <hr/> City Ithaca State NY Zip Code 14850 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> 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) ▼	Transaction ID: D423907 Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2010
	Amount of Each Disbursement this Period 1002.15
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Beta Parking <hr/> Mailing Address 545 5th Avenue <hr/> City New York State NY Zip Code 10017 <hr/> Purpose of Disbursement Monthly Parking Candidate Name <hr/> 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) ▼	Transaction ID: D423814 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2010
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3206.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Beta Parking</p> <p>Mailing Address 545 5th Avenue</p> <p>City New York State NY Zip Code 10017</p> <p>Purpose of Disbursement Monthly Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423886</p> <p>Date of Disbursement 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bianca Hajdu</p> <p>Mailing Address 87 Smith St, #8E</p> <p>City Brooklyn State NY Zip Code 11201</p> <p>Purpose of Disbursement Media Production Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423831</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Citibank, N.A.</p> <p>Mailing Address PO Box 5870</p> <p>City New York State NY Zip Code 10163</p> <p>Purpose of Disbursement Check Order Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423844</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 247.19</p>

SUBTOTAL of Disbursements This Page (optional) ▶

947.19

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Congregation Anshe Sholom</p> <p>Mailing Address 50 North Avenue</p> <p>City New Rochelle State NY Zip Code 10805</p> <p>Purpose of Disbursement Journal Advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423858</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Daniel Malave</p> <p>Mailing Address 240 Trenchard St</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423864</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 425.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Daniel Malave</p> <p>Mailing Address 240 Trenchard St</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423823</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 160.50</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

685.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Direct Mail of New York, Inc.</p> <p>Mailing Address 3199 Alba Post Road Suite 158</p> <p>City Buchanan State NY Zip Code 10511</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423866</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3300.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Direct Mail of New York, Inc.</p> <p>Mailing Address 3199 Alba Post Road Suite 158</p> <p>City Buchanan State NY Zip Code 10511</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423916</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2640.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Kimberly L. DiTomasso</p> <p>Mailing Address 428 W 23rd St, #2B</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423906</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2840.71"/></p>

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Kimberly L. DiTomaso</p> <p>Mailing Address 428 W 23rd St, #2B</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423874</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2840.71"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Kimberly L. DiTomaso</p> <p>Mailing Address 428 W 23rd St, #2B</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423825</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2793.27"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kimberly L. DiTomaso</p> <p>Mailing Address 428 W 23rd St, #2B</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423837</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2793.27"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Domenica Lagana <hr/> Mailing Address 60 Haines Blvd <hr/> City Port Chester State NY Zip Code 10573 <hr/> Purpose of Disbursement Canvassing Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423848 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Domenica Lagana <hr/> Mailing Address 60 Haines Blvd <hr/> City Port Chester State NY Zip Code 10573 <hr/> Purpose of Disbursement Canvassing Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423849 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 1140 <hr/> City Memphis State TN Zip Code 38101 <hr/> Purpose of Disbursement Deliveries Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423880 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 29.62

SUBTOTAL of Disbursements This Page (optional)	1029.62
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 1140 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 State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423881 Date of Disbursement 08 / 02 / 2010 Amount of Each Disbursement this Period 64.80
B.	Full Name (Last, First, Middle Initial) FEDEX Mailing Address PO BOX 1140 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 State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423882 Date of Disbursement 08 / 02 / 2010 Amount of Each Disbursement this Period 37.20
C.	Full Name (Last, First, Middle Initial) Ford Credit Mailing Address PO Box 220564 City Pittsburgh State PA Zip Code 15257-2564 Purpose of Disbursement Monthly Car Lease Candidate Name 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) ▼	Transaction ID: D423887 Date of Disbursement 08 / 02 / 2010 Amount of Each Disbursement this Period 326.52

SUBTOTAL of Disbursements This Page (optional) ▶

428.52

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Ford Credit

Transaction ID: D423819
Date of Disbursement

Mailing Address PO Box 220564

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

City Pittsburgh State PA Zip Code 15257-2564

Amount of Each Disbursement this Period

702.02

Purpose of Disbursement
Monthly Car Lease

Category/ Type

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)
George Kevgas

Transaction ID: D423832
Date of Disbursement

Mailing Address 585 McLean Ave - 4B

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	0

City Yonkers State NY Zip Code 10705

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Canvassing Services

Category/ Type

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)
Global Strategy Group, Inc.

Transaction ID: D423913
Date of Disbursement

Mailing Address 895 Broadway, 5th FL

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

City New York State NY Zip Code 10003

Amount of Each Disbursement this Period

12500.00

Purpose of Disbursement
Polling Expense

Category/ Type

Candidate Name

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

SUBTOTAL of Disbursements This Page (optional)

13502.02

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Harvard Club of New York City Mailing Address 27 West 44th Street City New York State NY Zip Code 10036 Purpose of Disbursement Catering Candidate Name 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) ▼	Transaction ID: D423815 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 12711.98
B.	Full Name (Last, First, Middle Initial) Harvard Club of New York City Mailing Address 27 West 44th Street City New York State NY Zip Code 10036 Purpose of Disbursement Catering Candidate Name 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) ▼	Transaction ID: D423850 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 1 0 Amount of Each Disbursement this Period 3113.26
C.	Full Name (Last, First, Middle Initial) Impressive Paper and Envelope Company Mailing Address 139 East Prospect Avenue City Mamaroneck State NY Zip Code 10543 Purpose of Disbursement Printing Candidate Name 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) ▼	Transaction ID: D423861 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 1 0 Amount of Each Disbursement this Period 1073.75

SUBTOTAL of Disbursements This Page (optional)	16898.99
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) Impressive Paper and Envelope Company <hr/> Mailing Address 139 East Prospect Avenue <hr/> City Mamaroneck State NY Zip Code 10543 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> 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) ▼	Transaction ID: D423816 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1073.75
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Impressive Paper and Envelope Company <hr/> Mailing Address 139 East Prospect Avenue <hr/> City Mamaroneck State NY Zip Code 10543 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> 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) ▼	Transaction ID: D423820 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1073.75
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Impressive Paper and Envelope Company <hr/> Mailing Address 139 East Prospect Avenue <hr/> City Mamaroneck State NY Zip Code 10543 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> 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) ▼	Transaction ID: D423910 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 2684.38
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4831.88

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Impressive Paper and Envelope Company</p> <p>Mailing Address 139 East Prospect Avenue</p> <p>City Mamaroneck State NY Zip Code 10543</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423890</p> <p>Date of Disbursement 08 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 10801.93</p>
<p>B. Full Name (Last, First, Middle Initial) JCY Westchester Community Partners</p> <p>Mailing Address 600 North Broadway</p> <p>City Yonkers State NY Zip Code 10701</p> <p>Purpose of Disbursement Journal Advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423857</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>
<p>C. Full Name (Last, First, Middle Initial) Jonathan Megron</p> <p>Mailing Address 38 Hillcrest</p> <p>City Yonkers State NY Zip Code 10705</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423824</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 230.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11121.93

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Key Post Realty Corp.</p> <p>Mailing Address PO Box 26</p> <p>City New Rochelle State NY Zip Code 10802</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423812</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1466.66"/></p>
<p>B. Full Name (Last, First, Middle Initial) Key Post Realty Corp.</p> <p>Mailing Address PO Box 26</p> <p>City New Rochelle State NY Zip Code 10802</p> <p>Purpose of Disbursement Office Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423879</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1466.66"/></p>
<p>C. Full Name (Last, First, Middle Initial) Mack/Crouse Group, LLC</p> <p>Mailing Address 2001 N. Beauregard Suite 420</p> <p>City Alexandria State VA Zip Code 22311</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423867</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5015.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="7948.32"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Mack/Crouse Group, LLC</p> <p>Mailing Address 2001 N. Beauregard Suite 420</p> <p>City Alexandria State VA Zip Code 22311</p> <p>Purpose of Disbursement Direct Mail Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423817</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2951.47"/></p>
<p>B. Full Name (Last, First, Middle Initial) McCarthy Fingar LLP</p> <p>Mailing Address 11 Martine Ave, 12th FL</p> <p>City White Plains State NY Zip Code 10606-1934</p> <p>Purpose of Disbursement Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423914</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2250.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Neftali Rosado</p> <p>Mailing Address 529 Kimball Ave</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423845</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5651.47"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Neftali Rosado</p> <p>Mailing Address 529 Kimball Ave</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423863</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p>
<p>B. Full Name (Last, First, Middle Initial) New Rochelle Democratic City Cmte</p> <p>Mailing Address 28 Trenor Drive</p> <p>City New Rochelle State NY Zip Code 10804</p> <p>Purpose of Disbursement Journal Advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423870</p> <p>Date of Disbursement 07 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) New York State Democratic Committee</p> <p>Mailing Address 461 Park Avenue South</p> <p>City New York State NY Zip Code 10016</p> <p>Purpose of Disbursement Voter File Access</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423843</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10700.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 5039 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Website Development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423875</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">600.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0	600.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	1	0													
600.00																						
<p>B. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 5039 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Website Development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423876</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0	3500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	1	0													
3500.00																						
<p>C. Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 5039 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Website Hosting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423883</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">400.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	2		2	0	1	0	400.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	2		2	0	1	0													
400.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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)

PAGE 79 / 96

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 5039 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Website Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423884</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 5039 Connecticut Ave, NW</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Software License Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423885</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1950.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Noam Bramson</p> <p>Mailing Address 201 Pinebrook Boulevard</p> <p>City New Rochelle State NY Zip Code 10804</p> <p>Purpose of Disbursement Strategic Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423878</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3750.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5775.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Noam Bramson</p> <p>Mailing Address 201 Pinebrook Boulevard</p> <p>City New Rochelle State NY Zip Code 10804</p> <p>Purpose of Disbursement Strategic Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423811</p> <p>Date of Disbursement 07 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 3750.00</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Olga Rosado</p> <p>Mailing Address 529 Kimball Ave</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423846</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Olga Rosado</p> <p>Mailing Address 529 Kimball Ave</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423829</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 780.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4980.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Olga Rosado</p> <p>Mailing Address 529 Kimball Ave</p> <p>City Yonkers State NY Zip Code 10704</p> <p>Purpose of Disbursement Canvassing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423862</p> <p>Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 280.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 100 Painters Mill Road PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423871</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 75.01</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 100 Painters Mill Road PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423872</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2349.39</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2704.40

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 100 Painters Mill Road PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423835 Date of Disbursement 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2743.97</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 100 Painters Mill Road PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423836 Date of Disbursement 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 84.51</p>
<p>C. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 100 Painters Mill Road PO Box 388</p> <p>City Owings Mills State MD Zip Code 21117</p> <p>Purpose of Disbursement Payroll Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423828 Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 71.65</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2900.13

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D423826 Date of Disbursement 07 / 02 / 2010
	Mailing Address 100 Painters Mill Road PO Box 388	Amount of Each Disbursement this Period 2049.68
	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D423908 Date of Disbursement 08 / 13 / 2010
	Mailing Address 100 Painters Mill Road PO Box 388	Amount of Each Disbursement this Period 2349.39
	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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: D423909 Date of Disbursement 08 / 13 / 2010
	Mailing Address 100 Painters Mill Road PO Box 388	Amount of Each Disbursement this Period 75.01
	City Owings Mills State MD Zip Code 21117	
	Purpose of Disbursement Payroll Fee	Category/ Type
	Candidate Name	
	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4474.08

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) PCMS, LLC	Transaction ID: D423892 Date of Disbursement 08 / 11 / 2010
	Mailing Address 5304 McKinley Street	Amount of Each Disbursement this Period 2263.38
	City Bethesda State MD Zip Code 20814	
	Purpose of Disbursement Accounting Services 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.	Full Name (Last, First, Middle Initial) PCMS, LLC	Transaction ID: D423818 Date of Disbursement 07 / 01 / 2010
	Mailing Address 5304 McKinley Street	Amount of Each Disbursement this Period 2512.50
	City Bethesda State MD Zip Code 20814	
	Purpose of Disbursement Accounting Services 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) ▼

C.	Full Name (Last, First, Middle Initial) PCMS, LLC	Transaction ID: D423860 Date of Disbursement 07 / 21 / 2010
	Mailing Address 5304 McKinley Street	Amount of Each Disbursement this Period 2209.58
	City Bethesda State MD Zip Code 20814	
	Purpose of Disbursement Accounting Services 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) ▼

SUBTOTAL of Disbursements This Page (optional)	6985.46
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 85 / 96

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Postmaster - NY BRM Mailing Address Business Reply 100 Fisher Ave City White Plains State NY Zip Code 10602-9995 Purpose of Disbursement Postage Permit Fee Candidate Name 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) ▼	Transaction ID: D423851 Date of Disbursement 07 / 21 / 2010 Amount of Each Disbursement this Period 185.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Prime New York Mailing Address 1560 Broadway #711 City New York State NY Zip Code 10036 Purpose of Disbursement Voter Data File Candidate Name 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) ▼	Transaction ID: D423889 Date of Disbursement 08 / 06 / 2010 Amount of Each Disbursement this Period 578.40 Category/Type
C.	Full Name (Last, First, Middle Initial) SunTrust Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Merchant Fees Candidate Name 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) ▼	Transaction ID: D423834 Date of Disbursement 07 / 13 / 2010 Amount of Each Disbursement this Period 855.97 Category/Type

SUBTOTAL of Disbursements This Page (optional)

1619.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Merchant Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423905</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="309.37"/></p>
<p>B. Full Name (Last, First, Middle Initial) The Frost Group</p> <p>Mailing Address 2737 Devonshire Place, NW #325</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Fundraising Expense Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423915</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="730.10"/></p>
<p>C. Full Name (Last, First, Middle Initial) The Frost Group</p> <p>Mailing Address 2737 Devonshire Place, NW #325</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Fundraising Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423810</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) The Frost Group</p> <p>Mailing Address 2737 Devonshire Place, NW #325</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Fundraising Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423877</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Twenty First Century Group, Inc.</p> <p>Mailing Address 434 New Jersey Ave, SE</p> <p>City Washington, State DC Zip Code 20003</p> <p>Purpose of Disbursement Site Rental/Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423891</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Utrecht & Phillips, PLLC</p> <p>Mailing Address 1900 M Street, NW Suite 500</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423813</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="959.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6709.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

<p>A. Full Name (Last, First, Middle Initial) V.I.P. Country Club</p> <p>Mailing Address 600 Davenport Ave</p> <p>City New Rochelle State NY Zip Code 10805</p> <p>Purpose of Disbursement Fundraising Event Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423904</p> <p>Date of Disbursement 08 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 18655.00</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO BOX 489</p> <p>City Newark State NJ Zip Code 07101</p> <p>Purpose of Disbursement Cell Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423868</p> <p>Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 270.25</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address 350 Granite Street</p> <p>City Braintree State MA Zip Code 02184</p> <p>Purpose of Disbursement Office Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D423869</p> <p>Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 722.51</p>

SUBTOTAL of Disbursements This Page (optional) ▶

19647.76

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address PO BOX 1270 <hr/> City Newark State NJ Zip Code 07101 <hr/> Purpose of Disbursement Membership Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423902 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 35.00
	[MEMO ITEM]
	Category/Type
B. Full Name (Last, First, Middle Initial) FEDEX <hr/> Mailing Address PO BOX 1140 <hr/> City Memphis State TN Zip Code 38101 <hr/> Purpose of Disbursement Deliveries Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423900 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 56.65
	[MEMO ITEM]
	Category/Type
C. Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 4455 Connecticut Avenue NW <hr/> City Washington State DC Zip Code 20008 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D423894 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0
	Amount of Each Disbursement this Period 131.56
	[MEMO ITEM]
	Category/Type

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

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

Mailing Address 415 New Jersey Ave, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D423897
Date of Disbursement

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

Amount of Each Disbursement this Period

798.60

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 620 Mamaroneck Ave

City White Plains State NY Zip Code 10605

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D423895
Date of Disbursement

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

Amount of Each Disbursement this Period

261.48

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Verizon - Conference Service

Mailing Address Po Box 15026

City Albany State NY Zip Code 12212-5026

Purpose of Disbursement
Teleconference Service

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: D423901
Date of Disbursement

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

Amount of Each Disbursement this Period

59.21

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address PO BOX 489

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Cell Phone Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423899
Date of Disbursement

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

Amount of Each Disbursement this Period

280.88

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Kimberly L. DiTomaso

Mailing Address 428 W 23rd St, #2B

City New York State NY Zip Code 10011

Purpose of Disbursement
Reimbursement - see below

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423822
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

1667.47

C.

Full Name (Last, First, Middle Initial)
FEDEX

Mailing Address PO BOX 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Deliveries

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423923
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

126.72

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1667.47

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.

Full Name (Last, First, Middle Initial)
Mamma Rosa's Sons

Mailing Address 205 East Post Road

City State Zip Code
White Plains NY 10601

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423926
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

290.23

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Nabel's Nurseries

Mailing Address 1485 Mamaroneck Avenue

City State Zip Code
White Plains NY 10605

Purpose of Disbursement
Flowers

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423927
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

216.54

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples - Potomac Yard

Mailing Address 3301 Jeff Davis Hwy

City State Zip Code
Alexandria VA 22305

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423930
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	0

Amount of Each Disbursement this Period

201.55

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: D423931 Date of Disbursement 07 / 01 / 2010
	Mailing Address 620 Mamaroneck Ave	Amount of Each Disbursement this Period 176.00
	City White Plains State NY Zip Code 10605	
	Purpose of Disbursement Postage	[MEMO ITEM]
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D423839 Date of Disbursement 07 / 16 / 2010
	Mailing Address PO BOX 1270	Amount of Each Disbursement this Period 427.03
	City Newark State NJ Zip Code 07101	
	Purpose of Disbursement Credit Card Payment	[MEMO ITEM]
	Candidate Name	
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Facebook Advertising	Transaction ID: D423842 Date of Disbursement 07 / 16 / 2010
	Mailing Address 156 University Ave	Amount of Each Disbursement this Period 298.82
	City Palo Alto State CA Zip Code 94301	
	Purpose of Disbursement Advertising	[MEMO ITEM]
	Candidate Name	
	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) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	427.03
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 94 / 96

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A.	Full Name (Last, First, Middle Initial) Staples - Potomac Yard	Transaction ID: D423840 Date of Disbursement 07 / 16 / 2010
	Mailing Address 3301 Jeff Davis Hwy	Amount of Each Disbursement this Period 105.93
	City Alexandria State VA Zip Code 22305	
	Purpose of Disbursement Supplies 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.	Full Name (Last, First, Middle Initial) Verizon - Conference Service	Transaction ID: D423841 Date of Disbursement 07 / 16 / 2010
	Mailing Address Po Box 15026	Amount of Each Disbursement this Period 27.52
	City Albany State NY Zip Code 12212-5026	
	Purpose of Disbursement Teleconference Service 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) ▼

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

166988.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement
Unlimited Transfer of Excess Funds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423854

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement
Unlimited Transfer of Excess Funds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: D423912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
JOHN HALL FOR CONGRESS

Mailing Address PO Box 469

City Beacon State NY Zip Code 12508

Purpose of Disbursement
Contribution

Candidate Name
John Hall

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 19

Transaction ID: D423852

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nita Lowey for Congress

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

Mailing Address 5 South Side Dr. #224

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement
Contribution

Candidate Name
M Scott Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 20

Transaction ID: D423911

Date of Disbursement

08 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Tim Bishop for Congress

Mailing Address 129 Wooley Street

City South Hampton State NY Zip Code 11968

Purpose of Disbursement
Contribution

Candidate Name
Timothy Bishop

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 01

Transaction ID: D423853

Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

78754.00