

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

MALONEY FOR CONGRESS

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	426695.04	492310.02
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	426195.04	491810.02
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	170208.71	236730.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	170208.71	236730.92
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1339081.64	
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
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
MALONEY FOR CONGRESS

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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

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

284095.06

330595.06

(ii) Unitemized.....

5085.00

6585.00

(iii) TOTAL of contributions

289180.06

337180.06

from individuals..... ▶

300.00

300.00

(b) Political Party Committees.....

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

137214.98

154829.96

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

426695.04

492310.02

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

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

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

0.00

23914.58

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

426695.04

516224.60

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	170208.71	236730.92
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.....	500.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	500.00
21. OTHER DISBURSEMENTS.....	24091.00	24091.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	194799.71	261321.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1107186.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	426695.04
25. SUBTOTAL (add Line 23 and Line 24).....	1533881.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	194799.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1339081.64

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 149
	<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Floyd Abrams		Date of Receipt
	Mailing Address 80 Pine Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10005
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.21071
	C		Amount of Each Receipt this Period
		250.00	
Name of Employer Cahill & Reiner		Occupation Lawyer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼			250.00

B.	Full Name (Last, First, Middle Initial) Russell H. Abrams		Date of Receipt
	Mailing Address 45 west 70th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10023
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.21000
	C		Amount of Each Receipt this Period
		2400.00	
Name of Employer Self-Employed		Occupation Investing	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼			2400.00

C.	Full Name (Last, First, Middle Initial) Russell H. Abrams		Date of Receipt
	Mailing Address 45 west 70th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10023
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.21001
	C		Amount of Each Receipt this Period
		2400.00	
Name of Employer Self-Employed		Occupation Investing	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼			4800.00

SUBTOTAL of Receipts This Page (optional)	5050.00
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 6 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen R. Aiello
Mailing Address 850 UN Plaza
City New York State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C**
Name of Employer Hill & Knowlton Occupation Chair
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21249
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Herbert A Allen
Mailing Address 711 Fifth Avenue
City New York State NY Zip Code 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Allen Company Occupation Banker
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21111
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Roger C. Altman
Mailing Address 15 East 92nd Street
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer Evercore Partners Occupation President
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2400.00
Date of Receipt 02 / 04 / 2009
Transaction ID: SA11AI.20824
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4400.00
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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Roger C. Altman

Mailing Address 15 East 92nd Street

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Evercore Partners President

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

Date of Receipt
MM / DD / YYYY
02 / 04 / 2009

Transaction ID: SA11AI.20826

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Chris G. Andersen

Mailing Address 430 Park Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
G.C. Andersen Partners LLC Investment Banker

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

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.20866

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ralph Andrew

Mailing Address 116 Pinehurst Avenue

City State Zip Code
New York NY 10033

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

Name of Employer Occupation
Eye & Ear Infirmary Director of Gov't Affairs

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

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.20867

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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 8 / 149

(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Wright H. Andrews

Mailing Address 8008 Algraves Street

City State Zip Code
McLean VA 22102-2005

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.20773

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Trisha Lum Attles

Mailing Address 2170 Century Park East #411

City State Zip Code
Los Angeles CA 90087

FEC ID number of contributing federal political committee. C

Name of Employer 8th Wonder Occupation
Producer

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.20774

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Trisha Lum Attles

Mailing Address 2170 Century Park East #411

City State Zip Code
Los Angeles CA 90087

FEC ID number of contributing federal political committee. C

Name of Employer 8th Wonder Occupation
Producer

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.20776

Amount of Each Receipt this Period
2200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 6900.00

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 9 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

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

Mailing Address 200 East End Avenue

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
EPC Lawyer

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11AI.20870

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Matt Bardach

Mailing Address 12 Rosenwood Lane

City State Zip Code
Wesley Hills NY 10901

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

Name of Employer Occupation
Davi's Financial Corp. President

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: SA11AI.21246

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ansar Batool

Mailing Address 30 Caroline Court

City State Zip Code
Closter NJ 07624

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

Name of Employer Occupation
Quality HomeCare Prodsuts President

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11AI.20868

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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 / 149
(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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Bruce A. Beal</p> <p>Mailing Address 60 Columbus Circle 19th floor</p> <p>City State Zip Code New York NY 10023</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Trlated Companies</p> <p>Occupation Real Estate</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 ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: SA11AI.20841</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Paul Beirne</p> <p>Mailing Address 1345 Avenue of the Americans</p> <p>City State Zip Code New York NY 10105-5858</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Dernstein Investment Rese-arch</p> <p>Occupation Lawyer</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 ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 31 / 2009</p> <p>Transaction ID: SA11AI.21255</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Robert A. Belfer</p> <p>Mailing Address 767 Fifth Avenue</p> <p>City State Zip Code New York NY 10153</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Belco Oil and Gas Corp,</p> <p>Occupation Chairman/President</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 ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 30 / 2009</p> <p>Transaction ID: SA11AI.21005</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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 11 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Albert C. Bellas
Mailing Address 1130 Park Avenue
City State Zip Code
New York NY 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Meuberg Berman Invest Advisor
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2009
Transaction ID: SA11AI.20872
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Charles Bendit
Mailing Address 40 West 74th Street #2
City State Zip Code
New York NY 10023
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Taconic Investment Partner CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt
M M / D D / Y Y Y Y
02 / 13 / 2009
Transaction ID: SA11AI.20829
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Edmund J. Bergassi
Mailing Address 24 Sharot Street
City State Zip Code
New Rochelle NY 10801
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Bergassi Group, LLC President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2009
Transaction ID: SA11AI.20880
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 12 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Edmund J. Bergassi

Mailing Address 24 Sharot Street

City State Zip Code
New Rochelle NY 10801

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

Name of Employer Occupation
Bergassi Group, LLC 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 Y
03 / 20 / 2009

Transaction ID: SA11AI.20881

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Marvin E. Bethea

Mailing Address 808 Myrna Drive

City State Zip Code
West Hempstead NY 11552

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

Name of Employer Occupation
Unsung Heroes Helping Heroes President

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11AI.20873

Amount of Each Receipt this Period
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jeff Blau

Mailing Address 181 East 65th Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Related Company Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 16 / 2009

Transaction ID: SA11AI.20844

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1850.00

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 13 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Leonard Blavatnik

Mailing Address 730 Fifth Avenue

City State Zip Code
New York NY 10019

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

Name of Employer Access Industries Occupation Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

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

Transaction ID: SA11AI.20778

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Leonard Blavatnik

Mailing Address 730 Fifth Avenue

City State Zip Code
New York NY 10019

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

Name of Employer Access Industries Occupation Chairman

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 2 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.20780

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas Roger Block

Mailing Address 499 Seventh Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Block Building LLC Occupation Real Estate

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 3 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.21035

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jessica Anne Brandit

Mailing Address 3386 E. River Road

City Tucson State AZ Zip Code 85718

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 ▼ 2300.00

Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20946
Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Martin Bresler

Mailing Address 910 Park Avenue

City New York State NY Zip Code 10021

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 03 / 17 / 2009
Transaction ID: SA11AI.21135
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Daniel Brodsky

Mailing Address 400 West 59th Street

City New York State NY Zip Code 10019

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

Name of Employer Brodsky Organization Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 02 / 27 / 2009
Transaction ID: SA11AI.21223
Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

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 15 / 149
(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Arline L. Bronzaft

Mailing Address 505 East 79th Street

City State Zip Code
New York NY 10075

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
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11AI.20875

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Joseph W. Brown

Mailing Address 24 Penwood Road

City State Zip Code
Bedford Corners NY 10549

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

Name of Employer M.B.I.A. Occupation CEO

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
03 / 23 / 2009

Transaction ID: SA11AI.20974

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Dean L. Buntrock

Mailing Address One Tower Lane

City State Zip Code
Oakbrook Terrace IL 60181-4636

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 20 / 2009

Transaction ID: SA11AI.20781

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

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 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donald C.C. Carey

Mailing Address 144 Dellwood Road

City State Zip Code
Bronxville NY 10017

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

Name of Employer Occupation
First American Title VP

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21066

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dayton T. Carr

Mailing Address 424 East 42nd Street

City State Zip Code
New York NY 10022-6444

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

Name of Employer Occupation
UCFA Group Investments

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

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 31 / 2009

Transaction ID: SA11AI.20570

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John A. Catsimatidis

Mailing Address 817 5th Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Red Apple Group CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21065

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4300.00**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Margo Catsimatidis
Mailing Address 817-5th Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21078

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Philip Christopher
Mailing Address 555 Wireless Blvd.

City State Zip Code
Hauppauge NY 11788

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

Name of Employer Occupation
Audiovox Communications President

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.20851

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Philip Christopher
Mailing Address 555 Wireless Blvd.

City State Zip Code
Hauppauge NY 11788

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

Name of Employer Occupation
Audiovox Communications President

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.20852

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7100.00**

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 18 / 149
	<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Lynn R. Coleman	Date of Receipt MM / DD / YYYY 02 / 20 / 2009
	Mailing Address 1440 New York Avenue NW	Transaction ID: SA11AI.20784
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Skadden Arps Occupation Attorney Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mary B. Colucci	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 7320 Austin Street	Transaction ID: SA11AI.20882
	City State Zip Code New York NY 11375-6206	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self-Employed Occupation Marketing Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Cristine C. Cronin	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address P.O. Box 230973	Transaction ID: SA11AI.20884
	City State Zip Code New York NY 10023	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Capital Group Occupation Financial 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)	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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 19 / 149
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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Mary Cronson	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 35 East 76th Street	Transaction ID: SA11AI.20886
	City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired Occupation N/A Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Gary A. Dachis	Date of Receipt MM / DD / YYYY 01 / 31 / 2009
	Mailing Address 19600 CedarHurst Street	Transaction ID: SA11AI.20572
	City State Zip Code Wayzata MN 55391	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self-employed Occupation Financial Consultant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Virginia L. Davies	Date of Receipt MM / DD / YYYY 03 / 01 / 2009
	Mailing Address 299 West 12th Street	Transaction ID: SA11AI.21315
	City State Zip Code New York NY 10014	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	In-kind - Catering Costs <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Sullivan & Cromwell Occupation Attorney Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	3900.00
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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

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

Mailing Address 8125 Brill Road

City State Zip Code
Cincinnati OH 45243

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

Name of Employer Check & Go Occupation President & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009

Transaction ID: SA11AI.21036

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David A. Davis

Mailing Address 8125 Brill Road

City State Zip Code
Cincinnati OH 45243

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

Name of Employer Check & Go Occupation President & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009

Transaction ID: SA11AI.21037

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles De Gunzburg

Mailing Address 499 Park Avenue

City State Zip Code
New York NY 10022

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

Name of Employer First Spring Corporation Occupation Vice Chair

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 20 / 2009

Transaction ID: SA11AI.20790

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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 21 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles De Gunzburg
Mailing Address 499 Park Avenue
City New York State NY Zip Code 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer First Spring Corporation Occupation Vice Chair
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00
Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.20791
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nathalie De Gunzburg
Mailing Address 499 Park Avenue
City New York State NY Zip Code 10022
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) ▼ 2400.00
Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.20792
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Nathalie De Gunzburg
Mailing Address 499 Park Avenue
City New York State NY Zip Code 10022
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) ▼ 2500.00
Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.20793
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2600.00
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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gina Dellaple
Mailing Address 2 Karen Road
City Pine Brook State NY Zip Code 07058
FEC ID number of contributing federal political committee. **C**
Name of Employer Northwest Occupation Office Worker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21118
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert De Rothchild
Mailing Address 130 East 63nd
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Rothchild Inc. Occupation Banker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 10 / 2009
Transaction ID: SA11AI.21127
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Patricia Duff
Mailing Address 437 East 87th Street
City New York State NY Zip Code 10028
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Investor
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 01 / 23 / 2009
Transaction ID: SA11AI.20638
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2000.00
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 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patricia Duff

Mailing Address 437 East 87th Street

City State Zip Code
New York NY 10028

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

Name of Employer Self Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: SA11AI.21129

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Patricia Duff

Mailing Address 437 East 87th Street

City State Zip Code
New York NY 10028

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

Name of Employer Self Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21094

Amount of Each Receipt this Period
1150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lee M. Elman

Mailing Address 450 Park Aveue

City State Zip Code
New York NY 10022

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

Name of Employer Elman Investors Inc. Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: SA11AI.20989

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1650.00**

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 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Elissa Epstein

Mailing Address 20 West 54th Street

City State Zip Code
New York NY 10023

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

Name of Employer Self Employed Occupation Doctor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 150 East 69th Street

City State Zip Code
New York NY 10021-5766

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: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrew Farkas

Mailing Address P.O. Box 1417

City State Zip Code
Greenvillew SC 29602

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

Name of Employer Island Capital Inc Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 25 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrew Farkas
Mailing Address P.O. Box 1417
City Greenville State SC Zip Code 29602
FEC ID number of contributing federal political committee. **C**
Name of Employer Island Capital Inc Occupation CEO
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21083
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ms Carol D. Farkas
Mailing Address 211 East 70th Street
City New York State NY Zip Code 10021
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) ▼ 1000.00
Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.20772
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lynn Feasley
Mailing Address 324 West3rd ST.
City New York State NY Zip Code 10011
FEC ID number of contributing federal political committee. **C**
Name of Employer Blue Wolf Capital Occupation Executive
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 03 / 13 / 2009
Transaction ID: SA11AI.21139
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3650.00
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 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Fichera
Mailing Address 115 East 87th St.
City State Zip Code
New York NY 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer Prudential Services Securities
Occupation Investment Banking
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
03 / 23 / 2009
Transaction ID: SA11AI.21247
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth Fisher
Mailing Address 245 East 58th Street #9-A
City State Zip Code
New York NY 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Fisher Brothers & Real Estate
Occupation Partner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2400.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009
Transaction ID: SA11AI.21084
Amount of Each Receipt this Period
2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth Fisher
Mailing Address 245 East 58th Street #9-A
City State Zip Code
New York NY 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Fisher Brothers & Real Estate
Occupation Partner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
4800.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009
Transaction ID: SA11AI.21085
Amount of Each Receipt this Period
2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **5800.00**
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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda Foa

Mailing Address 911 Park Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
01 / 19 / 2009

Transaction ID: SA11AI.20637

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 911 Park Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21110

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Larry Gagosian

Mailing Address 980 Madison Avenue

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Gagosian Gallery Owner

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21086

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Daniel J Gans

Mailing Address 425 Summer Drive

City State Zip Code
Alexandria VA 22301

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

Name of Employer Occupation
Polaris Govt. Relations Peincipal

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

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: SA11AI.20574

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Norton Garfinkle

Mailing Address 133 East 62nd St.

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Self-employed Investing

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

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: SA11AI.21257

Amount of Each Receipt this Period
2400.00

In-kind - Catering costs

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 121 Sweet Hollow Road

City State Zip Code
Huntington NY 11743

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

Name of Employer Occupation
West Hills Day Camp President

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

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: SA11AI.20653

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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 / 149
(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Edward Gersh

Mailing Address 121 Sweet Hollow Road

City State Zip Code
Huntington NY 11743

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

Name of Employer Occupation
West Hills Day Camp President

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21019

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Alan Jay Gerson

Mailing Address 505 LaGuardia Place

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
Self Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21088

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mrs. Mildred Glimcher

Mailing Address 435 East 52nd Street

City State Zip Code
New York NY 10022-6445

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

Name of Employer Occupation
Pace Wildenstein Art Historian

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: SA11AI.20576

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 30 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Laurence Gluck

Mailing Address 156 William Street

City State Zip Code
New York NY 10038

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

Name of Employer Occupation
Stellar Management Owner

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21089

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Arthur J. Goldfrank

Mailing Address 200 Central Park South

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Deutsche Bank Securities Banker

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

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 13 / 2009

Transaction ID: SA11AI.20835

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Eugene M Grant

Mailing Address 1016 Oriental Avenue

City State Zip Code
Mamaroneck NY 10543

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

Name of Employer Occupation
Self Employed 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
03 / 16 / 2009

Transaction ID: SA11AI.20854

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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 31 / 149
	(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Micah S. Green

Mailing Address 10413 Democracy Lane

City Potomac State MD Zip Code 20854

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

Name of Employer Patton Boggs Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: SA11AI.21038
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Zachary Robb Greenhill

Mailing Address 160 East 65th Street

City New York State NY Zip Code 10021

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

Name of Employer Self-employed Occupation Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 01 / 31 / 2009
Transaction ID: SA11AI.20579
Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert B. Greer

Mailing Address 14451 Twisted Oak Lane

City Houston State TX Zip Code 77079-7434

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

Name of Employer Bank Of Texas Occupation Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 01 / 31 / 2009
Transaction ID: SA11AI.20581
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 32 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pamela H. Grisson
Mailing Address 7230 Star Fury Place
City Tucson State AZ Zip Code 85718-1245
FEC ID number of contributing federal political committee. **C**
Name of Employer Sef-Employed Occupation Consultant
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20943
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pamela H. Grisson
Mailing Address 7230 Star Fury Place
City Tucson State AZ Zip Code 85718-1245
FEC ID number of contributing federal political committee. **C**
Name of Employer Sef-Employed Occupation Consultant
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20945
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lorraine. J. Gudas
Mailing Address 431 East 85th Street
City New York State NY Zip Code 10028
FEC ID number of contributing federal political committee. **C**
Name of Employer Weill Cornell Med. College Occupation Professor
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 01 / 31 / 2009
Transaction ID: SA11AI.20583
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5800.00
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 33 / 149
(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
							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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) Ms Agnes Gund		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 765 Park Avenue		Transaction ID: SA11AI.20996
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Museum of Modern Art	Occupation Volunteer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) John Halebian		Date of Receipt MM / DD / YYYY 03 / 16 / 2009
Mailing Address 250 east 73rd Street		Transaction ID: SA11AI.21131
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Abby L. Hans		Date of Receipt MM / DD / YYYY 01 / 31 / 2009
Mailing Address 3918 Chester Drive		Transaction ID: SA11AI.20584
City Glenview	State IL	Zip Code 60025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Financial Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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)	3500.00
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 34 / 149
(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

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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lawrence E. Harris

Mailing Address 10009 Chartwell Manor Court

City Potomac State MD Zip Code 20854

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

Name of Employer Patton, Boggs Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: SA11AI.21039

Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Daniel Hefflin

Mailing Address 20 West 64th Street

City New York State NY Zip Code 10169

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

Name of Employer ING Clarion Capital Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: SA11AI.21141

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Paul R. Herman

Mailing Address 276 Maple Street

City Englewood State NJ Zip Code 07631

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

Name of Employer Herrick Feinstein Occupation Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: SA11AI.21047

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 35 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. John A. Herrmann

Mailing Address 1105 Park Avenue

City State Zip Code
New York NY 10036

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

Name of Employer Occupation
J.P. Morgan-Chase Banker

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21049

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Leo Hindley

Mailing Address 188 East 78th Street

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Self-Employed Finance

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

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: SA11AI.21239

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 188 East 78th Street

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Self-Employed Finance

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

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: SA11AI.21241

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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 36 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Susan Hochberg
Mailing Address 226 East 87th Street #1B
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer New York City ACS Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 27 / 2009
Transaction ID: SA11AI.20998
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mary F. Holloway
Mailing Address 510 East 86th Street
City New York State NY Zip Code 10028-7606
FEC ID number of contributing federal political committee. **C**
Name of Employer The Holloway Group Occupation Chairman & CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20893
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elizabeth Holtzman
Mailing Address 2 Park Avenue
City New York State NY Zip Code 10016
FEC ID number of contributing federal political committee. **C**
Name of Employer Herrick, Feinstein LLP Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 02 / 13 / 2009
Transaction ID: SA11AI.20832
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 37 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Fred Taylor Isquith

Mailing Address 270 Madison Avenue

City State Zip Code
New York NY 10016-0601

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

Name of Employer Occupation
Wolf Handenstein Attorney

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

Date of Receipt
MM / DD / YYYY
01 / 06 / 2009

Transaction ID: SA11AI.20648

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Norman A. Israel

Mailing Address 10 Oaklawn Road

City State Zip Code
Short Hills NJ 07078

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

Name of Employer Occupation
Rael Automatic Sprinkler Owner

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21248

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Josh Jackson

Mailing Address 5-21136 West View

City State Zip Code
Wanton NJ 07885

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

Name of Employer Occupation
Northwest Executive

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21120

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 38 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dean Joan

Mailing Address 25 Central park West

City State Zip Code
New York NY 10023

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

Name of Employer Self-Employed Occupation
Financial Consultant

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

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.21128

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Abigaylek K. Jones

Mailing Address 450 Anatole Lane

City State Zip Code
Cleveland TN 37312

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

Name of Employer James Management Services Occupation
Recruiter

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

Date of Receipt
MM / DD / YYYY
02 / 04 / 2009

Transaction ID: SA11AI.20815

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Allan Jones

Mailing Address 450 Anatole Lane, NW

City State Zip Code
Cleveland TN 37212

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

Name of Employer Jones Management Services Occupation
Owner

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

Date of Receipt
MM / DD / YYYY
02 / 04 / 2009

Transaction ID: SA11AI.20821

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

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 39 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Janie P. Jones

Mailing Address 450 Anatole Lane, NW

City Cleveland State TN Zip Code 37312

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 ▼ 2000.00

Date of Receipt 02 / 04 / 2009
Transaction ID: SA11AI.20820
 Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Susan Henshaw Jones

Mailing Address 169 East 80th Street

City New York State NY Zip Code 10021

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

Name of Employer Museum Of The City Of New York Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009
Transaction ID: SA11AI.20972
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 101 Park Avenue

City New York State NY Zip Code 10017

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

Name of Employer H.J. Kalikow & Co., LLC Occupation Real Estate Developer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 23 / 2009
Transaction ID: SA11AI.20971
 Amount of Each Receipt this Period 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4650.00

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Andrea & Hillary A. Kaufman

Mailing Address 211 West 79th Street

City State Zip Code
New York NY 10024

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

Name of Employer Self Employed Occupation
Self Employed Dentist

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

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: SA11AI.20585

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Andrea & Hillary A. Kaufman

Mailing Address 211 West 79th Street

City State Zip Code
New York NY 10024

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

Name of Employer Self Employed Occupation
Self Employed Dentist

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

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.21183

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrea & Hillary A. Kaufman

Mailing Address 211 West 79th Street

City State Zip Code
New York NY 10024

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

Name of Employer Self Employed Occupation
Self Employed Dentist

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

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.21184

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George S. Kaufman

Mailing Address 450 Seventh Avenue

City State Zip Code
New York NY 10123

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

Name of Employer Kaufman Realty Corp. Occupation Real Estate

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	9

Transaction ID: SA11AI.20830

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George S. Kaufman

Mailing Address 450 Seventh Avenue

City State Zip Code
New York NY 10123

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

Name of Employer Kaufman Realty Corp. Occupation Real Estate

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: SA11AI.20933

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
George S. Kaufman

Mailing Address 450 Seventh Avenue

City State Zip Code
New York NY 10123

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

Name of Employer Kaufman Realty Corp. Occupation Real Estate

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.21256

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George S. Kaufman
 Mailing Address 450 Seventh Avenue
 City State Zip Code
 New York NY 10123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaufman Realty Corp. Real Estate
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3400.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009
Transaction ID: SA11AI.21164
 Amount of Each Receipt this Period
 400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Melvyn Kaufman
 Mailing Address 1320 Flager Drive
 City State Zip Code
 Mamaroneck NY 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Attorney
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009
Transaction ID: SA11AI.21166
 Amount of Each Receipt this Period
 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Melvyn Kaufman
 Mailing Address 1320 Flager Drive
 City State Zip Code
 Mamaroneck NY 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Attorney
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009
Transaction ID: SA11AI.21167
 Amount of Each Receipt this Period
 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5200.00
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 / 149
(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

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Israel S. Klein

Mailing Address 821 Violet Place

City State Zip Code
Silver Spring MD 20910

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

Name of Employer Occupation
Patton Boggs Principal

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21042

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Francesca Kress

Mailing Address 170nBelluable Lakes Road

City State Zip Code
Warwick NY 10990

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

Name of Employer Occupation
Self-Employed Doctor

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

Date of Receipt
MM / DD / YYYY
01 / 13 / 2009

Transaction ID: SA11AI.20636

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Jay L. Kriegel

Mailing Address 139 Spring Street

City State Zip Code
New York NY 10012

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

Name of Employer Occupation
The Related Co. Senior Advisor

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

Date of Receipt
MM / DD / YYYY
02 / 05 / 2009

Transaction ID: SA11AI.20849

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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 44 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Benjamin F. Kursman
Mailing Address 8 Fenbrook Drive
City Larchmont State NY Zip Code 10538
FEC ID number of contributing federal political committee. **C**
Name of Employer Herrick Feinstein Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21056
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jeffrey Kurzweil
Mailing Address 809 Olde Georgetown Ct
City Great Falls State VA Zip Code 22066-2700
FEC ID number of contributing federal political committee. **C**
Name of Employer Veneable Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 01 / 13 / 2009
Transaction ID: SA11AI.20629
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas J. Labarbera
Mailing Address 333 East 49th Street
City New York State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C**
Name of Employer Halstead Property, LLC Occupation Broker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20896
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 45 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Philip John Landrigan

Mailing Address 915 Stuart Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer Mount Sinai Hospital Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 02 / 04 / 2009
Transaction ID: SA11AI.20822
Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lee M. Leggett

Mailing Address 520 East 89th Street

City New York State NY Zip Code 10128

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

Name of Employer Self-Employed Occupation Literary Translator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 01 / 14 / 2009
Transaction ID: SA11AI.20639
Amount of Each Receipt this Period 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Anne Marie Levitt

Mailing Address 10 East 82nd Street

City New York State NY Zip Code 10028

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

Name of Employer C.S. Kansas City Corp. Occupation Real Estate

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20898
Amount of Each Receipt this Period 400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Annemarie Levitt
Mailing Address 10 east 82nd Street
City New York State NY Zip Code 10028-0304
FEC ID number of contributing federal political committee. **C**
Name of Employer C.S. Kansas City Corp. Occupation Vice President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2300.00
Date of Receipt 01 / 30 / 2009
Transaction ID: SA11AI.20594
Amount of Each Receipt this Period 1300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Emanuel Levy
Mailing Address 163 Bayside Drive
City Atlantic Beach Es State NY Zip Code 11509
FEC ID number of contributing federal political committee. **C**
Name of Employer New York Express Inc Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
500.00
Date of Receipt 03 / 16 / 2009
Transaction ID: SA11AI.21130
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Lewis
Mailing Address 225 West 106th Street
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer UN Federal Credit Union Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
250.00
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20900
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2050.00**
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 / 149
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Samuel H. Lindenbaum	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 1177 Avenue of The Americas	Transaction ID: SA11AI.20856
	City State Zip Code New York NY 10036	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Kramer Levin Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Harley Lippman	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1021 Park Avenue	Transaction ID: SA11AI.21124
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Genesis 10 President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Harley Lippman	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1021 Park Avenue	Transaction ID: SA11AI.21125
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Genesis 10 President	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	5800.00
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 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Marie Adam Lippman

Mailing Address 1021 Park Avenue

City State Zip Code
New York NY 10028

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) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21158

Amount of Each Receipt this Period

2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Marie Adam Lippman

Mailing Address 1021 Park Avenue

City State Zip Code
New York NY 10028

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) ▼ 4800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21160

Amount of Each Receipt this Period

2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Mr. Leonard Litwin

Mailing Address 1200 Union Tpke.

City State Zip Code
New Hyde Park NY 11040

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

Name of Employer Occupation
Glenwood Management President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11AI.21163

Amount of Each Receipt this Period

2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

7200.00

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 / 149
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Frank Liu	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 226 23rd 76th Road	Transaction ID: SA11AI.20903
	City State Zip Code Flushing NY 11364	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation World Harmony Foundation Founder	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) Judy Lotas	Date of Receipt MM / DD / YYYY 01 / 27 / 2009
	Mailing Address 118 Jaycrest Road	Transaction ID: SA11AI.20640
	City State Zip Code Duck NC 27409	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation LPNY Adm. Advertising	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Eugene Ludwing	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1201 Pennsylvania Avenue NW	Transaction ID: SA11AI.21034
	City State Zip Code Washigton DC 20004	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Promontory Financial Group LLC CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	4150.00
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 / 149
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ms Bernice Manocherian	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 135 Central Park West	Transaction ID: SA11AI.21091
	City State Zip Code New York NY 10023	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Real Estate-Design Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Alice Tepper Marlin	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 360 West 22nd Street	Transaction ID: SA11AI.20925
	City State Zip Code New York NY 10011-2634	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer SAI Occupation President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Peter W. May	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 280 Park Avenue	Transaction ID: SA11AI.21060
	City State Zip Code New York NY 10017	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Triac Companies Inc Occupation Executive Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	3650.00
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 51 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Peter W. May
Mailing Address 280 Park Avenue
City New York State NY Zip Code 10017
FEC ID number of contributing federal political committee. **C**
Name of Employer Triac Companies Inc Occupation Executive
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21061
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dennis & Karen Mehiel
Mailing Address 115 Stevens Avenue
City Valhalla State NY Zip Code 10595
FEC ID number of contributing federal political committee. **C**
Name of Employer Four M Investments Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 01 / 13 / 2009
Transaction ID: SA11AI.20622
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Richard Menschel
Mailing Address 660 Park Avenue
City New York State NY Zip Code 10010
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) ▼ 1000.00
Date of Receipt 01 / 13 / 2009
Transaction ID: SA11AI.20623
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5700.00
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 52 / 149
(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Allen Gifford Miller

Mailing Address 511 East 82nd Street

City State Zip Code
New York NY 10028-7177

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

Name of Employer Occupation
Miller Strategies Principal

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21055

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John Mills

Mailing Address 425 East 72nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
HIP Health Plans Product Development

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
01 / 16 / 2009

Transaction ID: SA11AI.20654

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Sally Minard

Mailing Address 133 East 62nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Retired N/A

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
01 / 23 / 2009

Transaction ID: SA11AI.21259

Amount of Each Receipt this Period
2162.31

In-kind - Catering Costs

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2912.31**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sally Minard
Mailing Address 133 East 62nd Street
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation N/A
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3162.31
Date of Receipt 01 / 31 / 2009
Transaction ID: SA11AI.20595
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sally Minard
Mailing Address 133 East 62nd Street
City New York State NY Zip Code 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation N/A
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3662.31
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20908
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Joseph Moinian
Mailing Address 1045 Park Avenue
City New York State NY Zip Code 10028
FEC ID number of contributing federal political committee. **C**
Name of Employer The Moinian Group Occupation President & CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 03 / 15 / 2009
Transaction ID: SA11AI.20858
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 54 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Nikos Mouyiaris

Mailing Address 32-02 Queens Blvd.

City State Zip Code
Long Island City NY 11101

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

Name of Employer Occupation
Mana Products Presidents

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: SA11AI.20987

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Nikos Mouyiaris

Mailing Address 32-02 Queens Blvd.

City State Zip Code
Long Island City NY 11101

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

Name of Employer Occupation
Mana Products Presidents

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: SA11AI.20988

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Manuel Munoz

Mailing Address 138 Overlook Avenue

City State Zip Code
Belvier NJ 07509

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

Name of Employer Occupation
Northwest Driver

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21122

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6300.00**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Toby S. Myerson

Mailing Address 1056 Fifth Avenue

City State Zip Code
New York NY 10028-0112

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

Name of Employer Occupation
Paul Weiss Attorney

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21076

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James L. Nederlander

Mailing Address 1450 Broadway

City State Zip Code
New York NY 10018

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

Name of Employer Occupation
Nederlander Producing Company President

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

Date of Receipt
MM / DD / YYYY
02 / 13 / 2009

Transaction ID: SA11AI.20837

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James L. Nederlander

Mailing Address 1450 Broadway

City State Zip Code
New York NY 10018

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

Name of Employer Occupation
Nederlander Producing Company President

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

Date of Receipt
MM / DD / YYYY
02 / 13 / 2009

Transaction ID: SA11AI.20839

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hassan Nemazee

Mailing Address 720 Park Avenue

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Nemazee Capital CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.21126

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robin Neustein

Mailing Address 101 Central Park West

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: SA11AI.20976

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robin Neustein

Mailing Address 101 Central Park West

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: SA11AI.20977

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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 57 / 149
	<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Louis L Nock		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 201 West 72nd Street		Transaction ID: SA11AI.20910
	City New York	State NY	Zip Code 10023
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Justice Herman Cohn	Occupation Law Secretary	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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) Jay Novik		Date of Receipt MM / DD / YYYY 01 / 13 / 2009
	Mailing Address 515 Congress Avenue		Transaction ID: SA11AI.20643
	City Austin	State TX	Zip Code 78701
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Black Diamond Capital	Occupation Investment Principal	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

C.	Full Name (Last, First, Middle Initial) Ellen W. Oppenheim		Date of Receipt MM / DD / YYYY 01 / 13 / 2009
	Mailing Address 156 East 79th Street		Transaction ID: SA11AI.20624
	City New York	State NY	Zip Code 10021-0435
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Magazine Publishers of Americ	Occupation Chief, Marketing	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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)	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 58 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jane L. Parshall

Mailing Address 222 East 71st #5A

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: SA11AI.20969

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Morris Pearl

Mailing Address 1020 Park Avenue

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Management Director Black Solutions

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11AI.20911

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jeffrey M. Peek

Mailing Address 895 Park Avenue

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Cit Group Inc. CHairman & CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 31 / 2009

Transaction ID: SA11AI.20596

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

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 / 149
(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Arnold Penner

Mailing Address 249 East 71st Street

City State Zip Code
New York NY 10021

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

Name of Employer Self-Employed Occupation
Real Estate

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21113

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Barton Mark Perl binder

Mailing Address 429 East 52nd Street

City State Zip Code
New York NY 10022

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

Name of Employer Self-Employed Occupation
Developer

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

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: SA11AI.20598

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Barton Mark Perl binder

Mailing Address 429 East 52nd Street

City State Zip Code
New York NY 10022

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

Name of Employer Self-Employed Occupation
Developer

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

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: SA11AI.20970

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 149

(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Barton Mark Perlbinder

Mailing Address 429 East 52nd Street

City State Zip Code
New York NY 10022

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

Name of Employer Self-Employed Occupation
Developer

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.21191

Amount of Each Receipt this Period

600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Howard E. Peskoe

Mailing Address 200 Park Avenue

City State Zip Code
New York NY 10019

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

Name of Employer Self-Employed Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.20860

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Charles Phillips

Mailing Address 113 West 88th Street

City State Zip Code
New York NY 10024

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

Name of Employer Best Efforts Occupation
Best Efforts

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.21243

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1850.00

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 61 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sarah Fiona Phillips

Mailing Address 1627 West 13th Street

City State Zip Code
Brooklyn NY 11223

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

Name of Employer Occupation
NYC Buildings- Enforcement Attorney

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

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.20914

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Samuel Polk

Mailing Address 190 East 7th Ave #506

City State Zip Code
New York NY 10009

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

Name of Employer Occupation
King Street Investor

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

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: SA11AI.20647

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leslie Fay Pomerantz

Mailing Address 15 West 81st Street

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: SA11AI.21143

Amount of Each Receipt this Period
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 62 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Shazia Z. Rafi

Mailing Address 10 Waterside Plaza

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Global Action-UN Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: SA11AI.21144

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Burton P. Resnick

Mailing Address 110 East 59th Street

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Jack Resnick & Sons Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21162

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Eric L. Robins

Mailing Address 1616 18th Street

City State Zip Code
Washingon DC 20009

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

Name of Employer Occupation
Williams & Jensen Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: SA11AI.20760

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 63 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eric L. Robins

Mailing Address 1616 18th Street

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
Williams & Jensen Attorney

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

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: SA11AI.20762

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 575 Eight Avenue

City State Zip Code
New York NY 10018

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

Name of Employer Occupation
Self-Employed Lawyer

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

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: SA11AI.20599

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 575 Eight Avenue

City State Zip Code
New York NY 10018

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

Name of Employer Occupation
Self-Employed Lawyer

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21058

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 64 / 149
	<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Samuel W. Rosenblatt		Date of Receipt
	Mailing Address 575 Eighth 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 03 / 16 / 2009
	City	State	Zip Code
	New York	NY	10018
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21188
Name of Employer Olmstead Properties		Occupation Real Estate	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"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Hal G. Rosenbluth		Date of Receipt
	Mailing Address 34-12 36th Sreet		<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 03 / 17 / 2009
	City	State	Zip Code
	Astoria	NY	11106
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21146
Name of Employer Astoria Studios		Occupation President	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="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Lawrence M. Rosenstock		Date of Receipt
	Mailing Address 14 East 90th 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 01 / 31 / 2009
	City	State	Zip Code
	New York	NY	10028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.20600
Name of Employer Tenzer, Greenblatt Blank & Rome		Occupation Attorney	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"/> 600.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1850.00
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 65 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen M Ross

Mailing Address 25 Columbus Circle

City State Zip Code
New York NY 10019

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

Name of Employer Related Company Occupation
Real Estate Developer

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

Date of Receipt
MM / DD / YYYY
02 / 16 / 2009

Transaction ID: SA11AI.20847

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mary Ann Rothman

Mailing Address 110 Riverside Drive

City State Zip Code
New York NY 10024

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

Name of Employer Council Of NY Cooperatives Occupation
Executive Director

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

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: SA11AI.20917

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Howard J. Rubenstein

Mailing Address 1345 Avenue Of The Americas

City State Zip Code
New York NY 10105

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

Name of Employer Rubenstein Association Occupation
Public Relations

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21073

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 66 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Jack Rudin

Mailing Address 241 Central Park West

City State Zip Code
New York NY 10024

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

Name of Employer Rudin Management Occupation Builder

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.21154

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William C. Rudin

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

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

Name of Employer Rudin Management Co. Occupation Real Estate

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.21165

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Denise Nadia Ruiz

Mailing Address 854 E. Main Street

City State Zip Code
Stratford CT 06614

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

Name of Employer Homemaker Occupation Homemaker

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.20602

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 67 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen M. Ryan

Mailing Address 6920 Edgewood Drive

City Gaithersburg State MD Zip Code 20877

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

Name of Employer Mc Dermott Will & Emery Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21023
Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Deborah Mary Sale

Mailing Address 151 West 74th Street #9A

City New York State NY Zip Code 10023-2201

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

Name of Employer Jones Hirsch, Connors & Bull PC Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2009
Transaction ID: SA11AI.20620
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Margaret Ann Santulli

Mailing Address 581 Main Street

City Woodbridge State NJ Zip Code 07095

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 ▼ 2400.00

Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.20761
Amount of Each Receipt this Period 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4900.00

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 68 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard T. Santulli
Mailing Address 581 Main Street

City State Zip Code
Woodbridge NJ 07095

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

Name of Employer Netjets Inc. Occupation Chairman & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

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

Transaction ID: SA11AI.20763

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard T. Santulli
Mailing Address 581 Main Street

City State Zip Code
Woodbridge NJ 07095

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

Name of Employer Netjets Inc. Occupation Chairman & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

Transaction ID: SA11AI.20764

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Christopher Scalero
Mailing Address 541 New York Avenue

City State Zip Code
New Jersey NJ 07070

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

Name of Employer Northwest Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.21116

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4800.00**

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 69 / 149

(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

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Spencer L Schneider

Mailing Address 10 Waterside Plaza

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Self-employed Lawyer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.20827

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Irwin Schneiderman

Mailing Address 203 East 72nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.21133

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Caryn A. Schwab

Mailing Address 200 East 78th Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Mount Sinai Queens Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.20649

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 70 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Caryn A. Schwab

Mailing Address 200 East 78th Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Mount Sinai Queens Executive

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

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: SA11AI.21134

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bernard L. Schwartz

Mailing Address 600 Third Avenue

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
BLS Investments CEO

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21059

Amount of Each Receipt this Period
2200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Irene Schwartz

Mailing Address 944 Fifth Avenue

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
01 / 13 / 2009

Transaction ID: SA11AI.20625

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4750.00**

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 71 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Nickie Mali Shapira

Mailing Address 3200 Toppington Drive

City State Zip Code
Beverly Hills CA 90210-1148

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

Name of Employer 8th Wonder Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

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

Transaction ID: SA11AI.20765

Amount of Each Receipt this Period
2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nickie Mali Shapira

Mailing Address 3200 Toppington Drive

City State Zip Code
Beverly Hills CA 90210-1148

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

Name of Employer 8th Wonder Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

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

Transaction ID: SA11AI.20767

Amount of Each Receipt this Period
2200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address One Steuben Place

City State Zip Code
Albany NY 12207

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

Name of Employer Wilson, Elser, Moskowitz, Edelm Occupation Attorney

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 3 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.20948

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

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 72 / 149
(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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
James L. Shea

Mailing Address 10909 Baronet Road

City Owings Mills State MD Zip Code 21117

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

Name of Employer Veneble Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 01 / 31 / 2009
Transaction ID: SA11AI.20618
Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Deborah Slott

Mailing Address 227 East 57th Street

City New York State NY Zip Code 10022

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

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21152
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Rochelle Slovin

Mailing Address 27 East 65th Street

City New York State NY Zip Code 10065

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

Name of Employer Museum Of the Moving Image Occupation Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2009
Transaction ID: SA11AI.20605
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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 73 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bill I. Smith

Mailing Address 300 Devon Drive

City State Zip Code
Homewood AL 35209

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

Name of Employer Easy Money Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.20608

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Beryl Snyder

Mailing Address 10 West 66th Street

City State Zip Code
New York NY 10023

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 ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	1	/	2	0	0	9

Transaction ID: SA11AI.20610

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jay T. Snyder

Mailing Address 1020 Fifth Avenue

City State Zip Code
New York NY 10028

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

Name of Employer Snyder Holdings Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.20645

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4300.00**

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 74 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carl Spielvogel
Mailing Address 720 Park Avenue
City New York State NY Zip Code 10021-4954
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Business Executive
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21150
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Carl Spielvogel
Mailing Address 720 Park Avenue
City New York State NY Zip Code 10021-4954
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Business Executive
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21151
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dr. Wenke Thoman Sterns
Mailing Address 180 East 95th Street
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer IMH Occupation Doctor
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 17 / 2009
Transaction ID: SA11AI.21148
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 75 / 149
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Merrill B Stone	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 4 Pumpkin Hill	Transaction ID: SA11AI.21014
	City State Zip Code Westpoint CT 06880	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Kelley,Drye, Warren LLP Attorney	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Marcia D. Sudolsky	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 928 Broadway Suite 505	Transaction ID: SA11AI.21072
	City State Zip Code New York NY 10010	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self-Employed Consultant	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Marcy Syms	Date of Receipt MM / DD / YYYY 01 / 26 / 2009
	Mailing Address One Syms Way	Transaction ID: SA11AI.20646
	City State Zip Code Secaucus NJ 07094	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Syms Corp. CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	3550.00
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 76 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Taconic Investment Partners LLC

Mailing Address 111 Eight Avenue Suite 1508

City State Zip Code
New York NY 10011

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

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 1 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.20588

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Charles Bendit

Mailing Address 40 West 74th Street #2

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Taconic Investment Partner CEO

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
0 1 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.20588.0

Amount of Each Receipt this Period
500.00

Partner

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

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

Mailing Address 40 West 14th Street

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Taconic Investment Partners CEO

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
0 1 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.20588.1

Amount of Each Receipt this Period
500.00

Partner

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

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 77 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Norman E. Taplin
 Mailing Address 1555 Palm Beach Lake Blvd,
 City State Zip Code
 West Palm Beach FL 33401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Attorney
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Willard B. Taylor
 Mailing Address 125 Broad Street
 City State Zip Code
 New York NY 10004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Sullivan & Cromwell Lawyer
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Amount of Each Receipt this Period 182.75
 In-kind - Catering Costs
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Maurice Tempelman
 Mailing Address 529 Fifth Avenue
 City State Zip Code
 New York NY 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Leon Tempelman & Son Business Executive
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1682.75
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 78 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mary Ann Tighe
Mailing Address 988 Fifth Avenue
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer CB Richard Ellis Occupation CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21155
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cathy Mitchell Toren
Mailing Address 45 East 85th St.
City New York State NY Zip Code 10028
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Consultant
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 03 / 14 / 2009
Transaction ID: SA11AI.21251
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
George J. Tsunis
Mailing Address 2 Meahon Place
City Centerport State NY Zip Code 11721-1724
FEC ID number of contributing federal political committee. **C**
Name of Employer Chartwell Hotels Occupation Chatirman/CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21031
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5050.00
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 79 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George J. Tsunis
Mailing Address 2 Meahon Place
City Centerport State NY Zip Code 11721-1724
FEC ID number of contributing federal political committee. **C**
Name of Employer Chartwell Hotels Occupation Chatirman/CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21033
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Olga J. Tsunis
Mailing Address 2 Meahon Place
City Centerport State NY Zip Code 11721-1724
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21027
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Olga J. Tsunis
Mailing Address 2 Meahon Place
City Centerport State NY Zip Code 11721-1724
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21030
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7200.00
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 80 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Martin Tuchman

Mailing Address 211 College Road E Third Fl

City State Zip Code
Princeton, NJ 08540

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

Name of Employer Occupation
Interpool Inc. Chairman & CEO

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

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: SA11AI.20756

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Ur

Mailing Address 964 Old School House Rd.

City State Zip Code
Newton NJ 07860

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

Name of Employer Occupation
Northwest Owner

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21092

Amount of Each Receipt this Period
1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 964 Old School House Rd.

City State Zip Code
Newton NJ 07860

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

Name of Employer Occupation
Northwest Owner

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

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11AI.21161

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **4300.00**

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 81 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
George Varrsos
Mailing Address 54 Arizona Avenue
City Long Beach State NY Zip Code 11103
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 31 / 2009
Transaction ID: SA11AI.21115
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Weinraub
Mailing Address 26 Woodmont Drive
City Delmar State NY Zip Code 12054-3811
FEC ID number of contributing federal political committee. **C**
Name of Employer Brown, McMahon Weinraub Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 03 / 23 / 2009
Transaction ID: SA11AI.20962
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms Diane N. Weiss
Mailing Address 3180 South Ocean Drive #1103
City Hallandale State FL Zip Code 33009
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Philanthropist
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20938
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 82 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms Diane N. Weiss

Mailing Address 3180 South Ocean Drive
#1103

City Hallandale State FL Zip Code 33009

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

Name of Employer None Occupation Philanthropist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 20 / 2009
Transaction ID: SA11AI.20939

Amount of Each Receipt this Period 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Weprin

Mailing Address 2 Wall Street

City New York State NY Zip Code 10005

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

Name of Employer Weprin & Ceccarell Occupation Council Member

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 16 / 2009
Transaction ID: SA11AI.21253

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John C . Whitehead

Mailing Address 65 East 55th Street

City New York State NY Zip Code 10022-3219

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 ▼ 2400.00

Date of Receipt 03 / 27 / 2009
Transaction ID: SA11AI.20995

Amount of Each Receipt this Period 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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 83 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph Wiscovitch

Mailing Address 227 East 57th Street

City State Zip Code
New York NY 10022

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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.20617

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Harriet R. Yassky

Mailing Address 441 West End Avenue

City State Zip Code
New York NY 10024-5328

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

Name of Employer Reaves,Parand Lehrer Occupation Attorney

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
0 3 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.20940

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	284095.06

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
For Jonathan Bing People

Mailing Address 847 A Second Avenue

City State Zip Code
New York NY 10017

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

Name of Employer Occupation
New York State Assemblyman

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

300.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: SA11B.20587

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C** C00401224
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7175.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: SA11C.21108
Amount of Each Receipt this Period: 7175.00
earmarked contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Heather K. Leifer
Mailing Address 420 East 80th St. #8A
City State Zip Code
New York NY 10021
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 100.00
Date of Receipt: 03 / 22 / 2009
Transaction ID: SA11C.21108.0
Amount of Each Receipt this Period: 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Richard Wood
Mailing Address 7 Manor Pond Lane
City State Zip Code
Irvington NY 10533
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Plaza Construction Inc. Contractor
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt: 03 / 23 / 2009
Transaction ID: SA11C.21108.1
Amount of Each Receipt this Period: 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **7175.00**
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 86 / 149

(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

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

Mailing Address 7 Manor Pond Lane

City Irvington State NY Zip Code 10533

FEC ID number of contributing federal political committee. C

Name of Employer Plaza Construction Inc. Occupation Contractor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 23 / 2009

Transaction ID: SA11C.21108.2

Amount of Each Receipt this Period 2400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Amy Foote

Mailing Address 1385 York Avenue

City New York State NY Zip Code 10021

FEC ID number of contributing federal political committee. C

Name of Employer C.V. Starr & Co. Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2009

Transaction ID: SA11C.21108.3

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Etan Merrik

Mailing Address 65 East 96th Street

City New York State NY Zip Code 10128

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation None

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 25.00

Date of Receipt 03 / 24 / 2009

Transaction ID: SA11C.21108.4

Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) 0.00

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 87 / 149
(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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Julie Domenick

Mailing Address 3917 Ivy Terrace Court NW

City State Zip Code
Wahington DC 20007

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

Name of Employer Occupation
The Loeffler Group Business Executive

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: SA11C.21108.5

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ADVANCE AMERICA CASH ADVANCE CENTERS INC POLITICAL ACTION COMMITTEE

Mailing Address 135 N. Church Street

City State Zip Code
Spartanburg SC 29306

FEC ID number of contributing federal political committee. **C** C00429001

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
02 / 20 / 2009

Transaction ID: SA11C.20768

Amount of Each Receipt this Period
4700.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC

Mailing Address WORLDWIDE HEADQUARTERS

City State Zip Code
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

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
02 / 20 / 2009

Transaction ID: SA11C.20759

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5700.00**

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 88 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLSTATE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 2775 Sanders Road
Suite A5

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing federal political committee. **C** C00040253

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
 03 / 31 / 2009

Transaction ID: SA11C.21024

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Association For Justice Pac

Mailing Address 1050 31st Street, NW

City State Zip Code
Washington DC 20007

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 ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 20 / 2009

Transaction ID: SA11C.20803

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION BANKPAC

Mailing Address 1120 CONN. AVE., NW SUITE 851

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

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
 01 / 31 / 2009

Transaction ID: SA11C.20615

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 89 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 700

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00147066

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
03 / 31 / 2009

Transaction ID: SA11C.21022

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES, AFL-CIO (D.C.)

Mailing Address 1625 L STREET, N.W.

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000120

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
03 / 31 / 2009

Transaction ID: SA11C.21070

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address Harborside Financial Center
201 Plaza III

City Jersey City State NJ Zip Code 07311

FEC ID number of contributing federal political committee. **C** C00077321

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
02 / 20 / 2009

Transaction ID: SA11C.20802

Amount of Each Receipt this Period 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

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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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
APPRAISAL INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 2600 VIRGINIA AVENUE NW SUTIE 123

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C** C00144261

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 7 / 2 0 0 9

Transaction ID: SA11C.20811

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)

Mailing Address 2901 Telestar Court 4th Floor

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00447565

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 3 / 3 1 / 2 0 0 9

Transaction ID: SA11C.21009

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
ASSOCIATION OF FLIGHT ATTENDANTS POLITICAL ACTION COMMITTEE ('FLIGHT PAC')

Mailing Address 1275 K STREET NW 5TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00151811

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
 0 2 / 2 7 / 2 0 0 9

Transaction ID: SA11C.20810

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

**SCHEDULE A (FEC Form 3)
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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
CASH AMERICA INTERNATIONAL INC. POLITICAL ACTION COMMITTEE

Mailing Address 1600 W. 7th Street

City State Zip Code
Fort Worth TX 76102

FEC ID number of contributing federal political committee. **C** C00275529

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 2 / 0 4 / 2 0 0 9

Transaction ID: SA11C.20813

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE

Mailing Address 701 Pennsylvania Avenue NW
Suite 750

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00039578

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 3 / 3 1 / 2 0 0 9

Transaction ID: SA11C.21044

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 805 15TH STREET NW SUITE 300

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00007880

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 3 / 2 5 / 2 0 0 9

Transaction ID: SA11C.20951

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

11000.00

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

**SCHEDULE A (FEC Form 3)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA
 Mailing Address 805 15TH STREET NW SUITE 300
 City State Zip Code
 WASHINGTON DC 20005
 FEC ID number of contributing federal political committee. **C** C00007880
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2009
Transaction ID: SA11C.20957
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE
 Mailing Address P.O. Box 365
 City State Zip Code
 Washington DC 20044
 FEC ID number of contributing federal political committee. **C** C00211318
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009
Transaction ID: SA11C.21045
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION
 Mailing Address 1111 19TH STREET NW SUITE 1100
 City State Zip Code
 WASHINGTON DC 20036
 FEC ID number of contributing federal political committee. **C** C00235309
 Name of Employer Occupation
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 13 / 2009
Transaction ID: SA11C.20633
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11000.00**
TOTAL This Period (last page this line number only) ►

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ESOP ASSOCIATION PAC

Mailing Address 1726 M STREET, NW SUITE 501

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00196089

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 2 / 2 0 / 2 0 0 9

Transaction ID: SA11C.20804

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
EXPERIAN NORTH AMERICA INC. POLITICAL ACTION COMMITTEE (EXPERIAN PAC)

Mailing Address 475 Anton Blvd

City State Zip Code
Costa Mesa CA 92626

FEC ID number of contributing federal political committee. **C** C00379768

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 2 / 2 0 / 2 0 0 9

Transaction ID: SA11C.20758

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1299 PENNSYLVANIA AVE NW STE 1100

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 3 / 2 0 0 9

Transaction ID: SA11C.20628

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE AKA GENWORTH PAC

Mailing Address 6620 W. Broad Street

City Richmond State VA Zip Code 23230

FEC ID number of contributing federal political committee. **C** C00404194

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11C.21021

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
GREENBERG TRAUIG LLP PAC

Mailing Address 1221 Brickell Avenue

City Miami State FL Zip Code 33131

FEC ID number of contributing federal political committee. **C** C00266585

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 31 / 2009

Transaction ID: SA11C.21103

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address One Thomas Circle NW Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: MM / DD / YYYY
01 / 13 / 2009

Transaction ID: SA11C.20627

Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(check only one)

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street SE Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: SA11C.20916

Amount of Each Receipt this Period

1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street SE Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

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
03 / 31 / 2009

Transaction ID: SA11C.21025

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS, IN SP BLDRS, BKMTHS, FRGRS & HLPERS-LOCAL

Mailing Address 753 STATE AVENUE SUITE 565

City State Zip Code
KANSAS CITY KS 66101

FEC ID number of contributing federal political committee. **C** C00005157

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
03 / 25 / 2009

Transaction ID: SA11C.20950

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS, IN SP BLDRS, BKMTHS, FRGRS & HLPF

Mailing Address 753 STATE AVENUE SUITE 565

City State Zip Code
KANSAS CITY KS 66101

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: SA11C.21016

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 15 POLITICAL ACTION COMMITTEE

Mailing Address 265 WEST 14TH STREET

City State Zip Code
NEW YORK NY 10011

FEC ID number of contributing federal political committee. **C** C00163956

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
02 / 13 / 2009

Transaction ID: SA11C.20828

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 15 POLITICAL ACTION COMMITTEE

Mailing Address 265 WEST 14TH STREET

City State Zip Code
NEW YORK NY 10011

FEC ID number of contributing federal political committee. **C** C00163956

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 Y
03 / 30 / 2009

Transaction ID: SA11C.21003

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) INTERNATIONAL UNION OF PAINTERS & ALLIED TRADE MEMBER & FAMILY FUNDRAISING RAFFLE

Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00349035

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
03 / 20 / 2009

Transaction ID: SA11C.21007

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00105981

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
02 / 20 / 2009

Transaction ID: SA11C.20797

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) IRONWORKERS POLITICAL ACTION LEAGUE

Mailing Address 1750 New York Ave. NW Ste. 400

City State Zip Code
Washington DC 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 ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: SA11C.20983

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

7000.00

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)
 Mailing Address 1601 K Street, NW
Suite 500
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00213173
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00
 Date of Receipt MM / DD / YYYY
02 / 20 / 2009
Transaction ID: SA11C.20788
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
L-3 COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE
 Mailing Address 600 Third Avenue
 City New York State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C** C00338087
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 2500.00
 Date of Receipt MM / DD / YYYY
01 / 13 / 2009
Transaction ID: SA11C.20626
 Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA
 Mailing Address 905 16TH STREET, N.W.
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00007922
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 2500.00
 Date of Receipt MM / DD / YYYY
03 / 27 / 2009
Transaction ID: SA11C.20958
 Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LYONDELL CHEMICAL COMPANY PAC

Mailing Address 1221 MCKINNEY STREET
SUITE 700

City State Zip Code
HOUSTON TX 77010

FEC ID number of contributing federal political committee. **C** C00306175

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: SA11C.20798

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A

Mailing Address One Madison Avenue

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00040923

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 3 / 3 1 / 2 0 0 9

Transaction ID: SA11C.21026

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1919 PENNSYLVANIA AVENUE NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00004812

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 2 / 2 7 / 2 0 0 9

Transaction ID: SA11C.20807

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11500.00**

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 100 / 149
(check only one)

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NASDAQ STOCK MARKET INC PAC

Mailing Address 1801 K Street
8th Floor

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00366013

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
03 / 31 / 2009

Transaction ID: SA11C.21040

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE

Mailing Address 3138 North 10th Street

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. **C** C00040659

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
02 / 27 / 2009

Transaction ID: SA11C.20806

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

Mailing Address 2901 TELESTAR COURT

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

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
03 / 31 / 2009

Transaction ID: SA11C.21099

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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 101 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 205 Daingerfield Road

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 7 / 2 0 0 9

Transaction ID: SA11C.20808

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL WOMEN'S POLITICAL CAUCUS CAMPAIGN SUPPORT COMMITTEE

Mailing Address PO Box 50467 Suite 310

City State Zip Code
WASHINGTON DC 20091

FEC ID number of contributing federal political committee. **C** C00034256

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 7 / 2 0 0 9

Transaction ID: SA11C.21224

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE (910)

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

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 3 / 2 0 / 2 0 0 9

Transaction ID: SA11C.20912

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4100.00**

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 102 / 149

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE Date of Receipt

Mailing Address 720 E Wisconsin Ave

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: SA11C.20878

City State Zip Code
Milwaukee WI 53202

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. **C** C00197095

1000.00

Name of Employer Occupation

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

B. Full Name (Last, First, Middle Initial) NYC Stagehands Political Action Committee Date of Receipt

Mailing Address 320 West 46th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	9

Transaction ID: SA11C.21190

City State Zip Code
New York NY 10036

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. **C** C00325639

250.00

Name of Employer Occupation

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

C. Full Name (Last, First, Middle Initial) PERSONAL CARE PRODUCTS COUNCIL (FORMERLY CTFA) POLITICAL ACTION COMMITTEE Date of Receipt

Mailing Address 1101 17TH STREET NW SUITE 300

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	9

Transaction ID: SA11C.20812

City State Zip Code
WASHINGTON DC 20036

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. **C** C00113845

2500.00

Name of Employer Occupation

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

SUBTOTAL of Receipts This Page (optional)

3750.00

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 103 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REED ELSEVIER INC POLITICAL ACTION COMMITTEE (REED ELSEVIER INC PAC)
Mailing Address 1150 18TH STREET NW SUITE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00345793

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
 03 / 16 / 2009

Transaction ID: SA11C.20862

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (REED ELSEVIER)
Mailing Address 30 EAST 29TH STREET

City State Zip Code
NEW YORK NY 10016

FEC ID number of contributing federal political committee. **C** C00174011

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
 03 / 31 / 2009

Transaction ID: SA11C.21237

Amount of Each Receipt this Period
 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
SERVICE EMPLOYEES INTERNATIONAL UNION
Mailing Address 1313 L STREET NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C70003124

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
 03 / 27 / 2009

Transaction ID: SA11C.20959

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6500.00

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 104 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHEET METAL AND AIR CONDITIONING CONTRACTORS' POLITICAL ACTION COMMITTEE
 Mailing Address 4201 LAFAYETTE CENTER DRIVE
 City State Zip Code
 CHANTILLY VA 22021
 FEC ID number of contributing federal political committee. **C** C00013961
 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 1 / 3 1 / 2 0 0 9
Transaction ID: SA11C.20616
 Amount of Each Receipt this Period
 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
STEPTOE AND JOHNSON LLP POLITICAL ACTION COMMITTEE
 Mailing Address 1330 CONNECTICUT AVENUE NW
 City State Zip Code
 WASHINGTON DC 20036
 FEC ID number of contributing federal political committee. **C** C00431858
 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 3 / 3 1 / 2 0 0 9
Transaction ID: SA11C.21011
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
The High Tech Strategies
 Mailing Address P.O. Box 3135
 City State Zip Code
 Nasham NH 03052-4513
 FEC ID number of contributing federal political committee. **C**
 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 3 / 2 7 / 2 0 0 9
Transaction ID: SA11C.20991
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7000.00
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 105 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Time Warner Cable
Mailing Address P.O. Box 9227

City State Zip Code
Uniondale NY 11555

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

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
 03 / 30 / 2009

Transaction ID: SA11C.21002

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE
Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

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
 01 / 31 / 2009

Transaction ID: SA11C.20601

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE
Mailing Address 55 Glenlake Parkway N.E.

City State Zip Code
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00064766

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
 03 / 30 / 2009

Transaction ID: SA11C.21004

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 106 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED PILOTS PAC/AIRLINE PILOTS ASSOCIATION

Mailing Address 9550 W. Higgins Rd.
Suite 1000

City ROSEMONT State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00251009

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: SA11C.21098
 Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
US CENTRAL CREDIT UNION POLITICAL ACTION COMMITTEE

Mailing Address 9701 Renner Boulevard Suite 100

City Lenexa State KS Zip Code 66219

FEC ID number of contributing federal political committee. **C** C00334656

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 01 / 13 / 2009
Transaction ID: SA11C.20632
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
VANGUARD COMMITTEE FOR RESPONSIBLE GOVERNMENT

Mailing Address 400 Devon Park Drive

City Wayne State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C** C00410266

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 02 / 20 / 2009
Transaction ID: SA11C.20757
 Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 107 / 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ven-Pac

Mailing Address P.O.Box 83142

City State Zip Code
Gaitesburg MD 20883

FEC ID number of contributing federal political committee. **C** C00369660

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1979.96

Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 0 6 / 2 0 0 9

Transaction ID: SA11C.21225

Amount of Each Receipt this Period
489.98

In-kind - catering costs
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	489.98
TOTAL This Period (last page this line number only)	▶	137214.98

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) ACTBLUE</p> <p>Mailing Address P.O. Box 382110</p> <p>City Cambridge State MA Zip Code 02238</p> <p>Purpose of Disbursement Fee for earmarked contributions Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21236 Date of Disbursement 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 283.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Actics-Grande, Ronan & Company, LLC</p> <p>Mailing Address 30 Main Street</p> <p>City Danbury State CT Zip Code 06810</p> <p>Purpose of Disbursement Accountant Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21209 Date of Disbursement 03 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 235.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) ADP Tx/Fincl Svc.</p> <p>Mailing Address 5800 Winward Pkwy</p> <p>City Alpharetta State GA Zip Code 30005</p> <p>Purpose of Disbursement Payroll Taxes Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21176 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 272.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

791.11

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

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) ADP Tx/Fincl Svc.</p> <p>Mailing Address 5800 Winward Pkwy</p> <p>City Alpharetta State GA Zip Code 30005</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21181 Date of Disbursement 02 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 916.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) E.R. Allegro</p> <p>Mailing Address 750 Columbus Avenue</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Bookkeeping</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21220 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) American Express Co.</p> <p>Mailing Address P.O.Box 2855</p> <p>City New York State NY Zip Code 10116-2855</p> <p>Purpose of Disbursement American Express Collection</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21172 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 9.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	4426.79
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)
MALONEY FOR CONGRESS

A.

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

Transaction ID: SB17.21174
Date of Disbursement

Mailing Address P.O.Box 2855

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	0	9

City State Zip Code
New York NY 10116-2855

Amount of Each Disbursement this Period

267.17

Purpose of Disbursement
Campaign

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

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

Transaction ID: SB17.21175
Date of Disbursement

Mailing Address P.O.Box 2855

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	0	9

City State Zip Code
New York NY 10116-2855

Amount of Each Disbursement this Period

9654.81

Purpose of Disbursement
Campaign -See Split

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
United Airlines

Transaction ID: SB17.21175.0
Date of Disbursement

Mailing Address P.P. Box 66100

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	0	9

City State Zip Code
Chicago IL 60666

Amount of Each Disbursement this Period

549.00

Purpose of Disbursement
Transportation

003 Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

9921.98

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Federal Express Co.

Transaction ID: SB17.21175.3
Date of Disbursement

Mailing Address 1475 Boettler Road

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

City Uniontown State OH Zip Code 44685

Amount of Each Disbursement this Period

38.58

Purpose of Disbursement
Mail

003

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Federal Express Co.

Transaction ID: SB17.21175.4
Date of Disbursement

Mailing Address 1475 Boettler Road

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	0	9

City Uniontown State OH Zip Code 44685

Amount of Each Disbursement this Period

64.26

Purpose of Disbursement
Mail

003

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Federal Express Co.

Transaction ID: SB17.21175.5
Date of Disbursement

Mailing Address 1475 Boettler Road

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	0	9

City Uniontown State OH Zip Code 44685

Amount of Each Disbursement this Period

23.63

Purpose of Disbursement
Mail

006

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Federal Express Co.</p> <p>Mailing Address 1475 Boettler Road</p> <p>City Uniontown State OH Zip Code 44685</p> <p>Purpose of Disbursement Mail</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.6</p> <p>Date of Disbursement 01 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 32.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Federal Express Co.</p> <p>Mailing Address 1475 Boettler Road</p> <p>City Uniontown State OH Zip Code 44685</p> <p>Purpose of Disbursement</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.7</p> <p>Date of Disbursement 01 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 22.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Apptix Hosted Exchange</p> <p>Mailing Address 13461 Sunrise Valley</p> <p>City Herndon State VA Zip Code 20171</p> <p>Purpose of Disbursement 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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.8</p> <p>Date of Disbursement 01 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 100.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Amtrak Co.

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-4225

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.21175.9
Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

271.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 111 W Rio Salado Park Way

City Tempe State AZ Zip Code 85281

Purpose of Disbursement
Travel-DC- Rochester

Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.21175.10
Date of Disbursement

01 / 02 / 2009

Amount of Each Disbursement this Period

657.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 111 W Rio Salado Park Way

City Tempe State AZ Zip Code 85281

Purpose of Disbursement
Travel-DC Rochester

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB17.21175.11
Date of Disbursement

01 / 02 / 2009

Amount of Each Disbursement this Period

657.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 111 W Rio Salado Park Way

City State Zip Code
Tempe AZ 85281

Purpose of Disbursement
Travel-LGA-Buffalo

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21175.12
Date of Disbursement

01 / 03 / 2009

Amount of Each Disbursement this Period

448.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Hyatt Hotel Buffalo

Mailing Address 2 Fiuntain Plaza

City State Zip Code
Buffalo NY 14202

Purpose of Disbursement
Lodging

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21175.13
Date of Disbursement

01 / 03 / 2009

Amount of Each Disbursement this Period

292.93

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Diamond Car Service

Mailing Address 7272 W. Henrietta

City State Zip Code
Rush NY 14527

Purpose of Disbursement
Car Service

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21175.15
Date of Disbursement

01 / 02 / 2009

Amount of Each Disbursement this Period

324.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Hyatt Hotel Buffalo</p> <p>Mailing Address 2 Fiuntain Plaza</p> <p>City Buffalo State NY Zip Code 14202</p> <p>Purpose of Disbursement Lodging-Food</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.17</p> <p>Date of Disbursement 01 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 165.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) American Car Service</p> <p>Mailing Address 701 East Hawatha Blvd.</p> <p>City Syracuse State NY Zip Code 13208</p> <p>Purpose of Disbursement Travel In Syracuse</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.18</p> <p>Date of Disbursement 01 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 552.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Clarion Riverside Hotel Rochester</p> <p>Mailing Address 120 Main Street</p> <p>City Rochester State NY Zip Code 14604</p> <p>Purpose of Disbursement Lodging</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.19</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 369.18</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address P.O. Box 619616 DFW Airport</p> <p>City Dallas State TX Zip Code 75261-9619</p> <p>Purpose of Disbursement Fundraising Travel-Vail Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.20 Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 586.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Federal Express Co.</p> <p>Mailing Address 1475 Boettler Road</p> <p>City Uniontown State OH Zip Code 44685</p> <p>Purpose of Disbursement Mail Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.21 Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 24.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) American Airlines</p> <p>Mailing Address P.O. Box 619616 DFW Airport</p> <p>City Dallas State TX Zip Code 75261-9619</p> <p>Purpose of Disbursement Fundraising- Vail Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21175.22 Date of Disbursement 01 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 576.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) American Airlines	Transaction ID: SB17.21175.23 Date of Disbursement 01 / 09 / 2009
	Mailing Address P.O. Box 619616 DFW Airport	Amount of Each Disbursement this Period 585.00
	City Dallas State TX Zip Code 75261-9619	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel -DC Financial Director Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
	State: District:	

B.	Full Name (Last, First, Middle Initial) Campo De Fiori Foods	Transaction ID: SB17.21175.24 Date of Disbursement 01 / 10 / 2009
	Mailing Address 2055 Mill Street	Amount of Each Disbursement this Period 1810.96
	City Aspen State CO Zip Code 81611	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering Costs-F/R Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
	State: District:	

C.	Full Name (Last, First, Middle Initial) U.S. Post Office	Transaction ID: SB17.21175.25 Date of Disbursement 01 / 03 / 2009
	Mailing Address G.O.P. Box	Amount of Each Disbursement this Period 1260.00
	City New York State NY Zip Code 10001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Stamps Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
	State: District:	

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Federal Express Co.

Mailing Address 1475 Boettler Road

City State Zip Code
Uniontown OH 44685

Purpose of Disbursement
Mail

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21175.26
Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

25.64

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

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

Mailing Address P.O.Box 2855

City State Zip Code
New York NY 10116-2855

Purpose of Disbursement
Amex Collection Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21178
Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

9.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

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

Mailing Address P.O.Box 2855

City State Zip Code
New York NY 10116-2855

Purpose of Disbursement
Campaign Expenses-See Split

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21182
Date of Disbursement

02 / 17 / 2009

Amount of Each Disbursement this Period

250.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

260.17

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

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Artz Communication Inc. <hr/> Mailing Address 123 William Street <hr/> City New York State NY Zip Code 10004 <hr/> Purpose of Disbursement Public Relations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21262 Date of Disbursement 01 / 03 / 2009 <hr/> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Artz Communication Inc. <hr/> Mailing Address 123 William Street <hr/> City New York State NY Zip Code 10004 <hr/> Purpose of Disbursement Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20683 Date of Disbursement 01 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Astoria Performing Arts Center <hr/> Mailing Address 34-23 Steinway Street <hr/> City Astoria State NY Zip Code 11101 <hr/> Purpose of Disbursement Journal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21205 Date of Disbursement 01 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	10400.00
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)

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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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Babara Lynn Creative

Transaction ID: SB17.20663
Date of Disbursement

Mailing Address 477 FDR Drive

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

City State Zip Code
New York NY 10002

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Web-site

006
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Babara Lynn Creative

Transaction ID: SB17.20736
Date of Disbursement

Mailing Address 477 FDR Drive

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

City State Zip Code
New York NY 10002

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Web-site Design

006
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Babara Lynn Creative

Transaction ID: SB17.20721
Date of Disbursement

Mailing Address 477 FDR Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	9

City State Zip Code
New York NY 10002

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
Wed-Site

001
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3600.00

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Back Country Caterer Mailing Address P.O. Box 681 City Vail State CO Zip Code 81658 Purpose of Disbursement Fundraising Catering Costs & Room Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20671 Date of Disbursement 01 / 02 / 2009 Amount of Each Disbursement this Period 2962.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bill Lynch Associates Mailing Address 308 Lenox Avenue City New York State NY Zip Code 10027 Purpose of Disbursement Public Relations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20666 Date of Disbursement 01 / 06 / 2009 Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bill Lynch Associates Mailing Address 308 Lenox Avenue City New York State NY Zip Code 10027 Purpose of Disbursement Public Relations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20679 Date of Disbursement 01 / 12 / 2009 Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	16962.12
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Bill Lynch Associates

Mailing Address 308 Lenox Avenue

City New York State NY Zip Code 10027

Purpose of Disbursement
Public Relations
Candidate Name

007
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.20684
Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

6000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Bulldog Finance Group

Mailing Address 1743 P. Street NW 201

City Wahington State DC Zip Code 20036

Purpose of Disbursement
Fundraising
Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.20727
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Butterfly Press

Mailing Address 2 Andersen Avenue

City Moonachie State NJ Zip Code 07072

Purpose of Disbursement
Printing
Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB17.20708
Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

3597.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

11597.38

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Carl Silverberg Association <hr/> Mailing Address 820 North Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement DC Financial Director Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20737 Date of Disbursement 01 / 29 / 2009 <hr/> Amount of Each Disbursement this Period 11790.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carl Silverberg Association <hr/> Mailing Address 820 North Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement DC Financial Director Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20743 Date of Disbursement 02 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 5679.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carl Silverberg Association <hr/> Mailing Address 820 North Carolina Avenue SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement DC Financial Director Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21203 Date of Disbursement 03 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

22469.53

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Carl Silverberg Association</p> <p>Mailing Address 820 North Carolina Avenue SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Reimbursement F/R Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.21204</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="781.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) King Klein Carole</p> <p>Mailing Address 11230 Dilling Street</p> <p>City Studio City State CA Zip Code 91602</p> <p>Purpose of Disbursement Fundraising Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.20711</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3127.80"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Chase Bank</p> <p>Mailing Address P.O. Box 15836</p> <p>City Willmington State DE Zip Code 19886-5836</p> <p>Purpose of Disbursement Merchant Banked Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.21171</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.20"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Chase Bank Mailing Address P.O. Box 15836 City Willmington State DE Zip Code 19886-5836 Purpose of Disbursement Merchant Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21179 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 65.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Chase Bank Mailing Address P.O. Box 15836 City Willmington State DE Zip Code 19886-5836 Purpose of Disbursement Returned Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21186 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Civitas Mailing Address 1457 Lexington Avenue City New York State NY Zip Code 10028 Purpose of Disbursement Ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20751 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 9 Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	425.25
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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Community Media LIC</p> <p>Mailing Address 487 Greenwich Street Suite 6A</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Ad Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20692 Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 260.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Con Edison Co.</p> <p>Mailing Address P.O. Box 1702</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Utility Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20710 Date of Disbursement 02 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 89.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Con Edison Co.</p> <p>Mailing Address P.O. Box 1702</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Utility Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20753 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 90.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

439.74

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Virginia L. Davies Mailing Address 299 West 12th Street City New York State NY Zip Code 10014 Purpose of Disbursement In-kind - Catering Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.21317 Date of Disbursement 03 / 01 / 2009 Amount of Each Disbursement this Period 2400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Democratic Organization Of Queens Mailing Address 72-50 Austin Street City Forest Hill State NY Zip Code 11375 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.20733 Date of Disbursement 03 / 26 / 2009 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Emily's List Mailing Address 1120 Connecticut Avenue NW City Washington State DC Zip Code 20036 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.20670 Date of Disbursement 01 / 12 / 2009 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	4400.00
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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Mark Feinberg <hr/> Mailing Address 15-01 Broadway <hr/> City Fairlawn State NJ Zip Code 07410 <hr/> Purpose of Disbursement Accountant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20667 Date of Disbursement 01 / 06 / 2009 <hr/> Amount of Each Disbursement this Period 275.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Feminist Majority <hr/> Mailing Address 1600 Wilson Blvd. <hr/> City Arlington State VA Zip Code 22029 <hr/> Purpose of Disbursement Donation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20705 Date of Disbursement 01 / 13 / 2009 <hr/> Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Sandy Frazier <hr/> Mailing Address 35 Mistletoe Lane <hr/> City Levittown State NY Zip Code 11756 <hr/> Purpose of Disbursement Media Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20658 Date of Disbursement 01 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1575.00

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Friends Of Squadron Mailing Address 14 Smith Street City Bklyn State NY Zip Code 11201 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21267 Date of Disbursement 02 / 10 / 2009 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Norton Garfinkle Mailing Address 133 East 62nd St. City New York State NY Zip Code 10021 Purpose of Disbursement In-kind - Catering costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21258 Date of Disbursement 01 / 23 / 2009 Amount of Each Disbursement this Period 2400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Greek News Mailing Address 35-05 23rd Avenue City Astoria State NY Zip Code 11105 Purpose of Disbursement Ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20698 Date of Disbursement 01 / 13 / 2009 Amount of Each Disbursement this Period 325.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3725.00
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Jacob Itskowitz

Mailing Address 131 East 92nd Street

City State Zip Code
New York NY 10128

Purpose of Disbursement
Campaign Worker

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20661
Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

700.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Joseph Addabo For State Senate

Mailing Address 159- 53 102nd ST.

City State Zip Code
Howard Beach NY 11788

Purpose of Disbursement

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21263
Date of Disbursement

02 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Lake Snell Perry and Associates

Mailing Address 1726 M. Street, NW

City State Zip Code
Washington DC 20036-9066

Purpose of Disbursement
Survey

Candidate Name

006
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21269
Date of Disbursement

01 / 30 / 2009

Amount of Each Disbursement this Period

4551.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6251.30

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ms Meg La Porte	Transaction ID: SB17.20659 Date of Disbursement 01 / 18 / 2009
	Mailing Address 108 East 82n Strret	Amount of Each Disbursement this Period 2000.00
	City New York State NY Zip Code 10128	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement NY Financial Director Helper Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Ms Meg La Porte	Transaction ID: SB17.20738 Date of Disbursement 02 / 03 / 2009
	Mailing Address 108 East 82n Strret	Amount of Each Disbursement this Period 2009.00
	City New York State NY Zip Code 10128	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement NY Financial Director Helper Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

C.	Full Name (Last, First, Middle Initial) Ms Meg La Porte	Transaction ID: SB17.21202 Date of Disbursement 03 / 01 / 2009
	Mailing Address 108 East 82n Strret	Amount of Each Disbursement this Period 2000.00
	City New York State NY Zip Code 10128	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement NYC Financial Director Helper Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	6009.00
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Group Inc. Manhattan Newspaper

Transaction ID: SB17.20697
Date of Disbursement

Mailing Address 63 West 38th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	9

City New York State NY Zip Code 10018

Amount of Each Disbursement this Period

Purpose of Disbursement
Ad

004
Category/
Type

345.00

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Group Inc. Manhattan Newspaper

Transaction ID: SB17.20706
Date of Disbursement

Mailing Address 63 West 38th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	9

City New York State NY Zip Code 10018

Amount of Each Disbursement this Period

Purpose of Disbursement
Ad

004
Category/
Type

345.00

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Group Inc. Manhattan Newspaper

Transaction ID: SB17.20750
Date of Disbursement

Mailing Address 63 West 38th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	9

City New York State NY Zip Code 10018

Amount of Each Disbursement this Period

Purpose of Disbursement
Ad

004
Category/
Type

345.00

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1035.00

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Trudy Mason</p> <p>Mailing Address 205 East 78th Street</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Travel expenses Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20677 Date of Disbursement 01 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 408.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Trudy Mason</p> <p>Mailing Address 205 East 78th Street</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Consultant Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20740 Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Trudy Mason</p> <p>Mailing Address 205 East 78th Street</p> <p>City New York State NY Zip Code 10021</p> <p>Purpose of Disbursement Travel Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20729 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 92.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	950.36
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Melissa Mendez

Transaction ID: SB17.20660
Date of Disbursement

Mailing Address 25-38 100th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	0	9

City East Elmhurst State NY Zip Code 11369

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Campaign worker

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Melissa Mendez

Transaction ID: SB17.20686
Date of Disbursement

Mailing Address 25-38 100th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	0	9

City East Elmhurst State NY Zip Code 11369

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Campaign worker

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Melissa Mendez

Transaction ID: SB17.20739
Date of Disbursement

Mailing Address 25-38 100th Street

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	0	9

City East Elmhurst State NY Zip Code 11369

Amount of Each Disbursement this Period

1081.00

Purpose of Disbursement
Campaign Worker

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2081.00

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Melissa Mendez <hr/> Mailing Address 25-38 100th Street <hr/> City East Elmhurst State NY Zip Code 11369 <hr/> Purpose of Disbursement Campaign Office Worker Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20723 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 531.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Sally Minard <hr/> Mailing Address 133 East 62nd Street <hr/> City New York State NY Zip Code 10021 <hr/> Purpose of Disbursement In-kind - Catering Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21260 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2162.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Nina Neivens <hr/> Mailing Address 24 East 93rd Street <hr/> City New York State NY Zip Code 10028 <hr/> Purpose of Disbursement Campaign Office Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20680 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 6236.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	8929.31
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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NEW YORK STATE DEMOCRATIC COMMITTEE	Transaction ID: SB17.21219 Date of Disbursement 02 / 05 / 2009	
	Mailing Address 60 Madison Avenue Suite 1201		
	City New York State NY Zip Code 10010	Amount of Each Disbursement this Period 700.00	
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	012 Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:		
B.	Full Name (Last, First, Middle Initial) NEW YORK STATE DEMOCRATIC COMMITTEE	Transaction ID: SB17.20734 Date of Disbursement 03 / 27 / 2009	
	Mailing Address 60 Madison Avenue Suite 1201		
	City New York State NY Zip Code 10010	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	012 Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:		
C.	Full Name (Last, First, Middle Initial) New York Young Democrats	Transaction ID: SB17.21216 Date of Disbursement 02 / 05 / 2009	
	Mailing Address 211-40 18th Avenue		
	City Bayside State NY Zip Code 11360	Amount of Each Disbursement this Period 250.00	
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	012 Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1450.00
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 137 / 149

<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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NGP Software Inc. <hr/> Mailing Address 5039 Connecticut Ave. NW <hr/> City Washington State DC Zip Code 20008-2056 <hr/> Purpose of Disbursement Annual Fee- Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20689 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Barry Nolan <hr/> Mailing Address 112 Nonemtum Street <hr/> City Newton State MD Zip Code 02450 <hr/> Purpose of Disbursement Media Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20665 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Barry Nolan <hr/> Mailing Address 112 Nonemtum Street <hr/> City Newton State MD Zip Code 02450 <hr/> Purpose of Disbursement Media Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.20668 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Barry Nolan

Mailing Address 112 Nonemtum Street

City State Zip Code
Newton MD 02450

Purpose of Disbursement
Media Consultant

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20682
Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Barry Nolan

Mailing Address 112 Nonemtum Street

City State Zip Code
Newton MD 02450

Purpose of Disbursement
reimbursement - office supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20688
Date of Disbursement

02 / 10 / 2009

Amount of Each Disbursement this Period

142.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
NY-20 VICTORY FUND

Mailing Address 3 WARREN ST

City State Zip Code
GLENS FALLS NY 12801

Purpose of Disbursement
Donation

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21265
Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

2400.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7542.88

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)
MALONEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Houses Ruppert Mailing Address 1779 Second Avenue City New York State NY Zip Code 10128 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.20664 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 9	Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Staples Co. Mailing Address P.O. Box 182378 City Columbus State OH Zip Code 43216 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.20678 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period 172.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Staples Co. Mailing Address P.O. Box 182378 City Columbus State OH Zip Code 43216 Purpose of Disbursement Supplies- Printer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.20714 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 9	Amount of Each Disbursement this Period 1208.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1731.12
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Suntrust Merchant Services

Transaction ID: SB17.21173
Date of Disbursement

Mailing Address PO Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	9

City Hagerstown State MD Zip Code 21740

Amount of Each Disbursement this Period

Purpose of Disbursement

003
Category/ Type

25.00

Merchant Fee
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Suntrust Merchant Services

Transaction ID: SB17.21180
Date of Disbursement

Mailing Address PO Box 6600

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

City Hagerstown State MD Zip Code 21740

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/ Type

25.00

Merchant Fee
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Taniment Regular Club

Transaction ID: SB17.21238
Date of Disbursement

Mailing Address 33-09 23rd Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	9

City Astoria State NY Zip Code 11101

Amount of Each Disbursement this Period

Purpose of Disbursement

012
Category/ Type

120.00

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

170.00

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Esler Group

Mailing Address 420 Lexington Avenue

City State Zip Code
New York NY 10170

Purpose of Disbursement
Fundraising

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20669
Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

4500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
The Esler Group

Mailing Address 420 Lexington Avenue

City State Zip Code
New York NY 10170

Purpose of Disbursement
Fundraising

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20745
Date of Disbursement

02 / 10 / 2009

Amount of Each Disbursement this Period

4500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
The Esler Group

Mailing Address 420 Lexington Avenue

City State Zip Code
New York NY 10170

Purpose of Disbursement
Fundraising

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20746
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

4500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13500.00

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) The Inner Circle</p> <p>Mailing Address P.O> Box 5372</p> <p>City New York State NY Zip Code 10185</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.20731</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) The National Herald</p> <p>Mailing Address 41-17 Crescent Avenue</p> <p>City Long Island State NY Zip Code 11101</p> <p>Purpose of Disbursement Ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.21197</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) The Service</p> <p>Mailing Address 42-16 34th Avenue</p> <p>City Long Island State NY Zip Code 11101</p> <p>Purpose of Disbursement Ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB17.20712</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="155.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2305.00"/></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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address P.O. Box 9227</p> <p>City Uniondale State NY Zip Code 11555</p> <p>Purpose of Disbursement Modem</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20709</p> <p>Date of Disbursement 01 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 174.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Time Warner Cable</p> <p>Mailing Address P.O. Box 9227</p> <p>City Uniondale State NY Zip Code 11555</p> <p>Purpose of Disbursement Modem and Cable</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20716</p> <p>Date of Disbursement 02 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 255.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Andrew R. Tullouch</p> <p>Mailing Address 1330 Avenue of the Americas 21st Floor</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Director and General Counsel</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20662</p> <p>Date of Disbursement 01 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 2030.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2459.80

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)
MALONEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Andrew R. Tullouch</p> <p>Mailing Address 1330 Avenue of the Americas 21st Floor</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Director and General Counsel</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20685</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Andrew R. Tullouch</p> <p>Mailing Address 1330 Avenue of the Americas 21st Floor</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Director and General Counsel</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20741</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2759.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Andrew R. Tullouch</p> <p>Mailing Address 1330 Avenue of the Americas 21st Floor</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Director and General Counsel</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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.20725</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 2530.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	7289.91
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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
U.S. Post Office

Transaction ID: SB17.21201
Date of Disbursement

Mailing Address G.O.P. Box

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

City State Zip Code
New York NY 10001

Amount of Each Disbursement this Period

840.00

Purpose of Disbursement
Stamps

003

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Ven-Pac

Transaction ID: SB17.21226
Date of Disbursement

Mailing Address P.O.Box 83142

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	0	9

City State Zip Code
Gaithesburg MD 20883

Amount of Each Disbursement this Period

489.98

Purpose of Disbursement
In-kind - catering costs

003

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.20690
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	9

City State Zip Code
Albany NY 12212-5124

Amount of Each Disbursement this Period

325.23

Purpose of Disbursement
Phone

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1655.21

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.20691
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	9	

City Albany State NY Zip Code 12212-5124

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

131.21

Phone
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.20715
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	9	

City Albany State NY Zip Code 12212-5124

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

608.07

Phone
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Verizon Co.

Transaction ID: SB17.20717
Date of Disbursement

Mailing Address P.O. Box 15124

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	9	

City Albany State NY Zip Code 12212-5124

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

136.24

Wireless
Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

875.52

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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Verizon Co.

Mailing Address P.O. Box 15124

City Albany State NY Zip Code 12212-5124

Purpose of Disbursement
Phone

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20752
Date of Disbursement

03 / 15 / 2009

Amount of Each Disbursement this Period

272.48

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Woodside Herald

Mailing Address 43-11 Greenpoint Avenue

City Sunnyside State NY Zip Code 11104

Purpose of Disbursement
Ad

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.20695
Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

140.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

412.48

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

168117.96

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

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NAME OF COMMITTEE (In Full)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)

Gary A. Dachis

Transaction ID: SB20A.21185

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	9

Mailing Address 19600 CedarHurst Street

City State Zip Code
Wayzata MN 55391

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Returned by Bank- Closed account

--

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 149 / 149

<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)
MALONEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Transaction ID: SB21.20755

Date of Disbursement

Mailing Address 430 SOUTH CAPITOL STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

City State Zip Code
WASHINGTON DC 20003

Amount of Each Disbursement this Period

24091.00

Purpose of Disbursement
Unlimited Transfer to National Party

011
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

24091.00

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

24091.00
