

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Nita Lowey for Congress

ADDRESS (number and street) PO Box 271  
 Check if different than previously reported. (ACC) White Plains NY 10605

2. **FEC IDENTIFICATION NUMBER** ▼ C C00219881 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
NY 17

## 4. TYPE OF REPORT (Choose One)

### (a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 06 / 26 / 2012 in the State of NY

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

- General (30G)  Runoff (30R)  Special (30S)

Election on 06 / 26 / 2012 in the State of NY

5. Covering Period 04 / 01 / 2012 through 06 / 06 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Melnikoff

Signature of Treasurer Richard Melnikoff [Electronically Filed] Date 06 / 14 / 2012

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Nita Lowey for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	218073.64	1283232.86
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	218073.64	1282732.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	150094.24	863022.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	21236.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	150094.24	841786.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1025375.48	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Nita Lowey for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	199470.00	1108815.00
(ii) Unitemized.....	3596.00	41855.00
(iii) TOTAL of contributions from individuals ▶	203066.00	1150670.00
(b) Political Party Committees.....	7.64	137.86
(c) Other Political Committees (such as PACs).....	15000.00	132425.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	218073.64	1283232.86
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	21236.06
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	105.83	17361.58
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	218179.47	1321830.50

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	150094.24	863022.41
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS .....	24402.00	331239.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	174496.24	1194761.41

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	981692.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	218179.47
25. SUBTOTAL (add Line 23 and Line 24).....	1199871.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	174496.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1025375.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Mary Adler**

Mailing Address **2 Brookwood Lane**

City **New City** State **NY** Zip Code **10956**

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

Name of Employer **CPAMG, LLC** Occupation **Real Estate**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2012**

**Transaction ID : C19367550**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mary Adler**

Mailing Address **2 Brookwood Lane**

City **New City** State **NY** Zip Code **10956**

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

Name of Employer **CPAMG, LLC** Occupation **Real Estate**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : C19421851**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Barry Alperin**

Mailing Address **875 Park Avenue**  
**Apt. 12D**

City **New York** State **NY** Zip Code **10021**

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 14 / 2012**

**Transaction ID : C19412217**

Amount of Each Receipt this Period  
**2000.00**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Roger 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 Investment Banker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2012

**Transaction ID : C19399835**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Chaundry Arif**

Mailing Address 1 John F. Kennedy Blvd. Apt 24B

City Somerset State NJ Zip Code 08873

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411987**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Madeleine Arnow**

Mailing Address 179 Griffen Avenue

City Scarsdale State NY Zip Code 10583

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

Name of Employer None Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2012

**Transaction ID : C19418272**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Art**

Mailing Address 140 E 45th St, Fl 43

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Kaufman Fund Portfolio Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : C19412505**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Ben Ashkenazy**

Mailing Address 995 5th Ave.

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Ashkenazy Acquisition Corp. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412221**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Bushra Baig**

Mailing Address 5 Farmers Ln.

City State Zip Code  
Head of the Harbor NY 11780-1232

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

Name of Employer Occupation  
Self-Employed Convenience Store Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411940**

Amount of Each Receipt this Period  
300.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Alice Baker**

Mailing Address 3333 E. Speedway

City Tucson State AZ Zip Code 85716

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

Name of Employer None Occupation Fundraising Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424354**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 26 Jean Lane

City Monsey State NY Zip Code 10952-5214

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

Name of Employer none Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 20 / 2012

**Transaction ID : C19390680**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Betty Balsam**

Mailing Address 26 Jean Lane

City Monsey State NY Zip Code 10952-5214

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

Name of Employer none Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 24 / 2012

**Transaction ID : C19392301**

Amount of Each Receipt this Period  
100.00

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

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

2700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Trevor Bavar**

Mailing Address 615 Harrison Avenue

City Harrison State NY Zip Code 10528

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2012

**Transaction ID : C19419554**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 181 E 65th St  
Apt 31A

City New York State NY Zip Code 10065-6642

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

Name of Employer Bernstein Litowitz Berger et al Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C19434448**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 181 E 65th St  
Apt 31A

City New York State NY Zip Code 10065-6642

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

Name of Employer Bernstein Litowitz Berger et al Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C19427526**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 119  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Natasha Bilimoria**

Mailing Address 3290 Arcadia Place, NW

City State Zip Code  
washington NY 20015

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

Name of Employer Occupation  
None None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : C19415313**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**James A. Block**

Mailing Address 750 Third Avenue  
9th Floor

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398002**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11 Windabout Drive

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
self physician/dermatologist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2012

**Transaction ID : C19381602**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Nicholas G. Cavarocchi**

Mailing Address 817 G Street, S.W.

City Washington State DC Zip Code 20024

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

Name of Employer Cavarocchi, Ruscio, Dennis Associates, Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : C19419508**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Shafquat Chaudhary**

Mailing Address 11 Soundview Dr.

City Bayville State NY Zip Code 11709

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

Name of Employer Elite Limousine Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19412001**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 246 Harriman Road

City Irvington State NY Zip Code 10533

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

Name of Employer Acorda Therapeutics, Inc. Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2012

**Transaction ID : C19369036**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 86 Sheldrake Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
Self-Employed NFP Management Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2012

**Transaction ID : C19384238**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 320 Central Park West #8G

City State Zip Code  
New York NY 10025

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

Name of Employer Occupation  
American University Scholar in Residence

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389600**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Toby Crystal**

Mailing Address 11 Chadworth Rd

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : C19385030**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Paul Curnin**

Mailing Address 40 Ocean Ave

City Larchmont State NY Zip Code 10538

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

Name of Employer simpson thacher Occupation lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423740**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 34 Century Ridge Rd

City Purchase State NY Zip Code 10577-1911

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : C19425257**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 34 Century Ridge Rd

City Purchase State NY Zip Code 10577-1911

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : C19427534**

Amount of Each Receipt this Period  
 1750.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Judith H. Darsky**

Mailing Address 4 Briar Del Circle

City Larchmont State NY Zip Code 10538

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

Name of Employer None Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423686**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Lyle Dennis**

Mailing Address 11515 Noahs Landing Ct

City Manassas State VA Zip Code 20112

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

Name of Employer Cavarocchio Russo Dennis Associates Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : C19422213**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Diker**

Mailing Address 944 Fifth Avenue

City New York State NY Zip Code 10021

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

Name of Employer Diker Management Occupation Managing Partner Investments

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423827**

Amount of Each Receipt this Period  
1000.00

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

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

2050.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 15 OF 119

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

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

Mailing Address 302 East Coronado Road

City Santa Fe State NM Zip Code 87505

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

Name of Employer Self-Employed Occupation Non-Profit organizations consulting

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C19407585**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J. Dwyer**

Mailing Address 1365 York Avenue Apt. 8B

City New York State NY Zip Code 10021

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

Name of Employer Boies, Schiller and Flekner LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424706**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew M Economos**

Mailing Address 44 Beech Hill Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393039**

Amount of Each Receipt this Period  
 1250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Andrew M Economos**

Mailing Address 44 Beech Hill Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420204**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Judith D Economos**

Mailing Address 44 Beech Hill Road

City Scarsdale State NY Zip Code 10583-3605

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393040**

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
**Blair W. Effron**

Mailing Address 830 Park Ave, 10B

City New York State NY Zip Code 10021

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

Name of Employer Centerview Partners Occupation Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19410904**

Amount of Each Receipt this Period  
2000.00

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

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

5250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>A. Joanne Egerman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012
Mailing Address 77 Westcliff Road		<b>Transaction ID : C19419558</b>
City Weston	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Sean Eldridge</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 16 / 2012
Mailing Address Po box 524		<b>Transaction ID : C19412326</b>
City Garrison	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hudson River Ventures LLC	Occupation Investor	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Wilma Ellenbogen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 19 / 2012
Mailing Address 777 Pelham Road 2G		<b>Transaction ID : C19390520</b>
City New Rochelle	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Allied Converters Inc.	Occupation Owner	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Linda A. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012	
Mailing Address 50 Popham Road #5A		<b>Transaction ID : C19398064</b>	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>Linda A. Ellis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012	
Mailing Address 50 Popham Road #5A		<b>Transaction ID : C19398061</b>	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>Moustafa M. Elshekh</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012	
Mailing Address 34-23 Steinway St Ste 600		<b>Transaction ID : C19411930</b>	
City Astoria	State NY	Zip Code 11101-1305	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 541 Claflin Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 19 / 2012**

**Transaction ID : C19419564**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Javaid Farooq**

Mailing Address 34 Timber Ridge Dr

City Huntington State NY Zip Code 11743-4899

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

Name of Employer Information Requested Occupation Information Requested

Sequel Systems IT Manager & Operations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 10 / 2012**

**Transaction ID : C19411972**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Laura Ferran**

Mailing Address 320 East 65th Street, Apt. 122

City New York State NY Zip Code 10021

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

Name of Employer Information Requested Occupation Information Requested

Bellevue Hospital Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2012**

**Transaction ID : C19398025**

Amount of Each Receipt this Period  
**300.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 19 York Road

City Larchmont State NY Zip Code 10538

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

Name of Employer Cromwell Occupation Business Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412019**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1 Haverford Avenue

City Scarsdale State NY Zip Code 10583

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389609**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1 Haverford Avenue

City Scarsdale State NY Zip Code 10583

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423675**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Francella**

Mailing Address 123 Avimore Drive

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
WESTMED Medical Group Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : C19412974**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dana Freyer**

Mailing Address 25 Autenrieth Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
Skadden Arps Slate Meagher & Flom LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389601**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dana Freyer**

Mailing Address 25 Autenrieth Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
Skadden Arps Slate Meagher & Flom LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393021**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Dana Freyer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 23 / 2012	
Mailing Address 25 Autenrieth Road		<b>Transaction ID : C19393022</b>	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Skadden Arps Slate Meagher & Flom LLP	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>B. Ross Frommer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 30 / 2012	
Mailing Address 595 West 239th Street		<b>Transaction ID : C19423608</b>	
City Bronx	State NY	Zip Code 10463	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Columbia University	Occupation Government Affairs		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Roni Ginott</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2012	
Mailing Address 650 Lake Avenue		<b>Transaction ID : C19423668</b>	
City Greenwich	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Rayburn Music	Occupation CEO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 119	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	12	13a	13b	14

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

**A.** Full Name (Last, First, Middle Initial)  
**Mildred B Glimcher**

Mailing Address 435 East 52nd Street  
Apt. 24C

City New York State NY Zip Code 10022-6495

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

Name of Employer Pace Wildenstein Gallery Occupation Art Historian

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : C19407536**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 150 Central Park South #1006

City New York State NY Zip Code 10019

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

Name of Employer Self - Employed Occupation Producer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 02 / 2012

**Transaction ID : C19398151**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4 Mid Pl

City Chappaqua State NY Zip Code 10514

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

Name of Employer The Horah Group Occupation Salesman/President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 31 / 2012

**Transaction ID : C19423641**

Amount of Each Receipt this Period  
100.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Jamie Beck Gordon**

Mailing Address 628 Orienta Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 17 / 2012

**Transaction ID : C19384248**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Rebecca Grafstein**

Mailing Address 1049 5th Avenue 11B

City New York State NY Zip Code 10028

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

Name of Employer none Occupation philanthropist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : C19385053**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Rebecca Grafstein**

Mailing Address 1049 5th Avenue 11B

City New York State NY Zip Code 10028

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

Name of Employer none Occupation philanthropist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : C19385044**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Lawrence Gralla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012	
Mailing Address 33 Rockledge Road		<b>Transaction ID : C19419465</b>	
City Hartsdale	State NY	Zip Code 10530	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>Lawrence Gralla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 15 / 2012	
Mailing Address 33 Rockledge Road		<b>Transaction ID : C19419464</b>	
City Hartsdale	State NY	Zip Code 10530	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>Yvette Gralla</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012	
Mailing Address 33 Rockledge Rd.		<b>Transaction ID : C19397980</b>	
City Hartsdale	State NY	Zip Code 10530	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer N/A	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Yvette Gralla**

Mailing Address 33 Rockledge Rd.

City: Hartsdale State: NY Zip Code: 10530

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 05 / 15 / 2012

**Transaction ID : C19419469**

Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Yvette Gralla**

Mailing Address 33 Rockledge Rd.

City: Hartsdale State: NY Zip Code: 10530

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

Name of Employer: N/A Occupation: Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 05 / 15 / 2012

**Transaction ID : C19419467**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 1016 Orienta Ave

City: Mamaroneck State: NY Zip Code: 10543

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

Name of Employer: none Occupation: retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3500.00

Date of Receipt: 05 / 26 / 2012

**Transaction ID : C19422274**

Amount of Each Receipt this Period: 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1016 Orienta Ave

City Mamaroneck State NY Zip Code 10543

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

Name of Employer none Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : C19422266**

Amount of Each Receipt this Period  
 1500.00

3500.00

**B.** Full Name (Last, First, Middle Initial)  
**Eugene Grant**

Mailing Address 1016 Orienta Ave

City Mamaroneck State NY Zip Code 10543-4712

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19395158**

Amount of Each Receipt this Period  
 1000.00

1000.00

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

Mailing Address 84 Dusk Drive

City New Rochelle State NY Zip Code 10804

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

Name of Employer Monroe College Occupation Dean of Students

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420164**

Amount of Each Receipt this Period  
 1000.00

1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 44 Lounsbury Road

City State Zip Code  
Croton-on-Hudson NY 10520

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

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 23 / 2012

**Transaction ID : C19393030**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 820 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Observatory Group CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2012

**Transaction ID : C19397414**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 11 Oak Lane

City State Zip Code  
Larchmont NY 10538

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

Name of Employer Occupation  
The Delta Group Chairman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 24 / 2012

**Transaction ID : C19420122**

Amount of Each Receipt this Period  
500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Stephen A Hochman**

Mailing Address 303 West Street

City State Zip Code  
White Plains NY 10605

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

Name of Employer Occupation  
Friedman Wittenstein Hochman Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393034**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Hazel H Holub**

Mailing Address 19 Griffen Avenue

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
none none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424678**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 4106 22nd Street NW

City State Zip Code  
Washington DC 20018

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

Name of Employer Occupation  
Creative Associates International Director External Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19409464**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Gedale Horowitz**

Mailing Address 1 Pond Park Road

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Citigroup Sr. Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2012

**Transaction ID : C19401403**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 34 Water Street

City State Zip Code  
Eastchester NY 10709

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

Name of Employer Occupation  
OTA Management LLC Director of Operations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2012

**Transaction ID : C19423683**

Amount of Each Receipt this Period  
250.00

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

Mailing Address Po box 524

City State Zip Code  
Garrison NY 10524

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

Name of Employer Occupation  
Self-employed Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 16 / 2012

**Transaction ID : C19412328**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Fern Hurst**

Mailing Address 1060 5th Ave

City New York State NY Zip Code 10128

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2012

**Transaction ID : C19427510**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Malik M Hussain**

Mailing Address 784 Wyngate Drive West

City Valley Stream State NY Zip Code 11580

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411969**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Deborah Hutchins**

Mailing Address 44 Island Drive

City Rye State NY Zip Code 10580

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412016**

Amount of Each Receipt this Period  
2500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Glenn G Hutchins**

Mailing Address 75 Rockefeller Plaza  
Ste. 900

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Silver Lake Partners Financial Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : C19412014**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**George Ingram**

Mailing Address 138 11th Street, Se

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation  
USGLC economist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 29 / 2012

**Transaction ID : C19422182**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Azmat Iqbal**

Mailing Address 4 Farmwood Ln

City State Zip Code  
Glen Head NY 11545

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

Name of Employer Occupation  
Self-Employed Businessman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 10 / 2012

**Transaction ID : C19411959**

Amount of Each Receipt this Period  
500.00

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

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

3250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Zafar Iqbal**

Mailing Address 1550 Route 1 South

City State Zip Code  
Rahway NJ 07065

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

Name of Employer Occupation  
Self-Employed Businessman

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 10 / 2012

**Transaction ID : C19411951**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Marjorie Isaac**

Mailing Address 55 Grasslands Rd  
Apt D259

City State Zip Code  
Valhalla NY 10595

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 27 / 2012

**Transaction ID : C19401380**

Amount of Each Receipt this Period  
2300.00

**C.** Full Name (Last, First, Middle Initial)  
**Marjorie Isaac**

Mailing Address 55 Grasslands Rd  
Apt D259

City State Zip Code  
Valhalla NY 10595

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 27 / 2012

**Transaction ID : C19401381**

Amount of Each Receipt this Period  
200.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 34 OF 119  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Muhammed Ishfaq**

Mailing Address 235-18 Seward Ave

City State Zip Code  
Bellerose NY 11427

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411965**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Leslie Jerome**

Mailing Address 18 Johnson Court

City State Zip Code  
Cresskill NJ 07626

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

Name of Employer Occupation Information Requested  
Monroe College Director Special Services

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : C19419532**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Joan J Kass**

Mailing Address 200 Hillair Circle

City State Zip Code  
White Plains NY 10605-4515

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

Name of Employer Occupation Information Requested  
Pace University Educator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389608**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 35 OF 119

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

**A.** Full Name (Last, First, Middle Initial)  
**Rosaline Kaufman**

Mailing Address 119 Haviland Road

City Harrison State NY Zip Code 10528

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

Name of Employer The Jacob Fuchsberg Law Firm Occupation Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19427506**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jurate Kazickas**

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 Self Employed Occupation Writer

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2012

**Transaction ID : C19399842**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 138 Ogden Avenue

City Dobbs Ferry State NY Zip Code 10522

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

Name of Employer Dobbs Ferry Trustee Occupation Lawyer

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 500.00

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

**Transaction ID : C19407526**

Amount of Each Receipt this Period  
 500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Meredith Korreich**

Mailing Address 133 Wendover Road

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420179**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Alice Kramer**

Mailing Address 688 Westover Road

City State Zip Code  
Stamford CT 06902

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

Name of Employer Occupation  
NYU Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : C19425821**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8 Barry Court

City State Zip Code  
Katonah NY 10536

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : C19419527**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 15 Woodbine Avenue

City Larchmont State NY Zip Code 10538

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

Name of Employer Kriss & Feuerstein LLP Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412220**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Charito Kruvant**

Mailing Address 1095 Langley Fork Lane

City McLean State VA Zip Code 22101

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

Name of Employer Creative Associates International Occupation President and CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : C19412327**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joanne Landau**

Mailing Address 2114 Quaker Ridge Road

City Croton on Hudson State NY Zip Code 10520

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

Name of Employer Kurtsam Realty Corp Occupation real estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2012

**Transaction ID : C19425255**

Amount of Each Receipt this Period  
 750.00

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

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

4250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ruth Lapidus**

Mailing Address 23 Delevan Lane

City Harrison State NY Zip Code 10528

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19397993**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 23 Delevan Lane

City Harrison State NY Zip Code 10528

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19397992**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sidney Lapidus**

Mailing Address 23 Delevan Lane

City Harrison State NY Zip Code 10528

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

Name of Employer E.M. Warburg Pincus & Company Occupation Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398000**

Amount of Each Receipt this Period  
2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Sidney Lapidus</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012
Mailing Address 23 Delevan Lane		<b>Transaction ID : C19397999</b>
City Harrison	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer E.M. Warburg Pincus & Company	Occupation Managing Director	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Deborah Slaner Larkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012
Mailing Address 237 Loring Avenue		<b>Transaction ID : C19397973</b>
City Pelham	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer USTA	Occupation Executive	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. John F Larkin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 02 / 2012
Mailing Address 237 Loring Avenue		<b>Transaction ID : C19397975</b>
City Pelham	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Mendez & Mount	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**John F Larkin**

Mailing Address 237 Loring Avenue

City Pelham State NY Zip Code 10803

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

Name of Employer Mendez & Mount Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C1939796**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**John F Larkin**

Mailing Address 237 Loring Avenue

City Pelham State NY Zip Code 10803

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

Name of Employer Mendez & Mount Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C1939794**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 3 Stone Hollow Way

City Armonk State NY Zip Code 10504

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

Name of Employer Lashins Realty Services Occupation Real Estate Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424701**

Amount of Each Receipt this Period  
1000.00

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

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

3700.00



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

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

FOR LINE NUMBER: PAGE 41 OF 119  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Royden Letsen**

Mailing Address 828 South Broadway, Suite 103

City Tarrytown State NY Zip Code 10591

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

Name of Employer Self Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2012

**Transaction ID : C19419559**

Amount of Each Receipt this Period  
 500.00

Amount of Each Receipt this Period  
 800.00

**B.** Full Name (Last, First, Middle Initial)  
**Irwin Levy**

Mailing Address 1601 Froum Place - Suite 500

City west palm beach State FL Zip Code 33401

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

Name of Employer cenvill recreation Occupation business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423745**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 4000.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Levy**

Mailing Address 55 Winding Lane

City Greenwich State CT Zip Code 06831

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

Name of Employer Alvin Press Inc. Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393038**

Amount of Each Receipt this Period  
 2500.00

Amount of Each Receipt this Period  
 2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ann Frank Lewis**

Mailing Address 4550 North Park Avenue #708

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : C19407584**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Adam Lipson**

Mailing Address 161 North Middletown Road

City State Zip Code  
Pearl River NY 10965-2029

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

Name of Employer Occupation  
Network & Security Technologies President & CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 15 / 2012

**Transaction ID : C19419567**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Christine Madden**

Mailing Address 8 Lincoln Avenue

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
Chris Madden Inc. Writer/Designer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 01 / 2012

**Transaction ID : C19424669**

Amount of Each Receipt this Period  
500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Edward Manley**

Mailing Address 35 Alpine Lane

City Chappaqua State NY Zip Code 10514

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398125**

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**Alisa Mannis**

Mailing Address 130 Dorchester Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398294**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Alisa Mannis**

Mailing Address 130 Dorchester Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398314**

Amount of Each Receipt this Period  
 2500.00

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

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

5100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 369 Gundry Drive

City Falls Church State VA Zip Code 22046

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

Name of Employer CAII Occupation Sr. Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19409569**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Marcia L. Menter**

Mailing Address 64 Richbell Road

City White Plains State NY Zip Code 10605

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

Name of Employer none Occupation writer/editor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2012

**Transaction ID : C19384784**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Katherine Moore**

Mailing Address 4100 Theall Road

City Rye State NY Zip Code 10580

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C19407580**

Amount of Each Receipt this Period  
 500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Saul Morgenstern</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012
Mailing Address 49 Riverview Avenue		<b>Transaction ID : C19397920</b>
City Ardsley	State NY	
Zip Code 10502		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Kaye Scholer LLP	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Khurshid Mughal</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012
Mailing Address 22 Andover Dr.		<b>Transaction ID : C19411975</b>
City Syosset	State NY	
Zip Code 11791-6302		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Sequel Systems	Occupation CEO	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Noaman Mughal</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2012
Mailing Address 22 Andover Dr.		<b>Transaction ID : C19411993</b>
City Syosset	State NY	
Zip Code 11791		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer International Business Services	Occupation Principal	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 6511 Princeton Dr.

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Cornerstone Government Affairs Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : C19401382**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jodi E. Nass**

Mailing Address 16 Justin Road

City State Zip Code  
Harrison NY 10528

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

Name of Employer Occupation  
Silvermine Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2012

**Transaction ID : C19419518**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy E. Neuman**

Mailing Address 19 Manursing Way

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
Coldwell Banker real estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412023**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 4838 Rockwood Parkway NW

City Washington State DC Zip Code 20016

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

Name of Employer State Dept. Occupation Dep. Sec.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2012

**Transaction ID : C19399820**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**martha nierenberg**

Mailing Address 15 middle patent rd.

City armonk State NY Zip Code 10504

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

Name of Employer State Dept. Occupation none

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19424159**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Nolon**

Mailing Address 108 Cobb Lane

City Tarrytown State NY Zip Code 10591

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

Name of Employer State Dept. Occupation Pace University Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412017**

Amount of Each Receipt this Period  
 1000.00

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Och**

Mailing Address 11 Dolma Road

City Scarsdale State NY Zip Code 10583-4505

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

Name of Employer Och -Ziff Capital Management Group Occupation Senior Managing Member

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420143**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 42 Sheldrake Road

City Scarsdale State NY Zip Code 10583

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

Name of Employer C.H.O. Enterprises, Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : C19407579**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Herbert Oestreich**

Mailing Address 1 Well House Lane

City Mamaroneck State NY Zip Code 10543

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

Name of Employer Self-Employed Occupation Physician/Surgeon

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424704**

Amount of Each Receipt this Period  
1000.00

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

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

5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Margaret Orr</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2012
Mailing Address 18 minuturn street		<b>Transaction ID : C19395081</b>
City Hastings on hudson	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bank street college	Occupation Faculty	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 525.00	

Full Name (Last, First, Middle Initial) <b>B. Margaret Orr</b>		Date of Receipt MM / DD / YYYY 06 / 01 / 2012
Mailing Address 18 minuturn street		<b>Transaction ID : C19424730</b>
City Hastings on hudson	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Bank street college	Occupation Faculty	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 525.00	

Full Name (Last, First, Middle Initial) <b>C. Fred Neil Peck</b>		Date of Receipt MM / DD / YYYY 05 / 23 / 2012
Mailing Address 3 Dorchester Avenue		<b>Transaction ID : C19418166</b>
City New City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer none	Occupation retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 50 OF 119  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Samuel Perelson**

Mailing Address 1 Dag Hammarskjold Plaza, 42 Fl.

City New York State NY Zip Code 10017

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

Name of Employer Perelson Weiner LLP Occupation CPA

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2012

**Transaction ID : C19425572**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Daphne Philipson**

Mailing Address PO BOX 242 Hudson House

City Ardsley-on-Hudson State NY Zip Code 10503

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398032**

Amount of Each Receipt this Period  
 1250.00

**C.** Full Name (Last, First, Middle Initial)  
**Daphne Philipson**

Mailing Address PO BOX 242 Hudson House

City Ardsley-on-Hudson State NY Zip Code 10503

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398034**

Amount of Each Receipt this Period  
 1250.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 119			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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

**A.** Full Name (Last, First, Middle Initial)  
**Leandra Pope**

Mailing Address 66 Hickory Kingdom Road

City Bedford State NY Zip Code 10506

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

Name of Employer Self-Employed Occupation Theatre Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19424694**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mahera Rahman**

Mailing Address 1997 Twin Sun Cir.

City Walled Lake State MI Zip Code 48390

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

Name of Employer Council on Pakistan Relations Occupation Executive Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411998**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 3318 O Street NW

City Washington State DC Zip Code 20007

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398299**

Amount of Each Receipt this Period  
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Nataly S. Ritter**

Mailing Address 1450 Flagler Drive

City Mamaroneck State NY Zip Code 10543

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

Name of Employer Self-Employed Occupation Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : C19422239**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dorothy B Roer**

Mailing Address 50 Doral Greens Dr. West

City Port Chester State NY Zip Code 10573

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

Name of Employer Self-Employed Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393031**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Ricki E Roer**

Mailing Address 25 Central Park West  
Apt 4-l

City New York State NY Zip Code 10023

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

Name of Employer Wilson Elser Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2012

**Transaction ID : C19393146**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Martin Rogowsky**

Mailing Address 20 Bardion Lane

City Harrison State NY Zip Code 10528

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2012

**Transaction ID : C19417710**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 832 Germantown Pike, Ste 5

City Plymouth Meeting State PA Zip Code 19462

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

Name of Employer Roizman & Companies Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : C19412552**

Amount of Each Receipt this Period  
 2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Du P. Roosevelt**

Mailing Address 88 Ely's Ferry Rd.

City Lyme State CT Zip Code 07371

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : C19385014**

Amount of Each Receipt this Period  
 500.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Christopher Du P. Roosevelt**

Mailing Address 88 Ely's Ferry Rd.

City State Zip Code  
Lyme CT 07371

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : C19407571**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 75 Echo Bay Drive

City State Zip Code  
New Rochelle NY 10805

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

Name of Employer Occupation  
Rosen Development Group, Inc. President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 02 / 2012

**Transaction ID : C19398015**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Camilla M Rosenfeld**

Mailing Address 8 Coventry Court

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
none homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19394784**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 993 5th Avenue

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Howard J. Rubenstein Associates Inc. Public Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389605**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lynne Rubin**

Mailing Address 29 East 64 Street

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Self Psychotherapist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : C19412566**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Domenic R. Ruscio**

Mailing Address Cavarocchi, Ruscio, Dennis Associa  
600 Maryland Avenue SW

City State Zip Code  
Washington DC 20024

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

Name of Employer Occupation  
Cavarocchio, Ruscio, Dennis Associatie Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2012

**Transaction ID : C19419507**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Keith F. Safian**

Mailing Address 18 Cole Drive

City Armonk State NY Zip Code 10504

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

Name of Employer Phelps Memorial Hospital Assocation Occupation Hospital Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : C19415384**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jack Saltz**

Mailing Address #32 The Crossings at Blind Brook

City Purchase State NY Zip Code 10577

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

Name of Employer Self- Employed Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2012

**Transaction ID : C19422240**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Arthur Sarnoff**

Mailing Address 151 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer Bruno Appliance Corporation Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19395125**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Harriet P Schleifer**

Mailing Address 49 Carolyn Place

City Chappaqua State NY Zip Code 10514

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

Name of Employer Student Advocacy Inc. Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420209**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harriet P Schleifer**

Mailing Address 49 Carolyn Place

City Chappaqua State NY Zip Code 10514

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

Name of Employer Student Advocacy Inc. Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420210**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Leonard Schleifer M.D.**

Mailing Address 49 Carolyn Place

City Chappaqua State NY Zip Code 10514

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

Name of Employer Regeneron Occupation President and CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : C19420495**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Leonard Schleifer M.D.**

Mailing Address 49 Carolyn Place

City Chappaqua State NY Zip Code 10514

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

Name of Employer Regeneron Occupation President and CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : C19420490**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Schloss**

Mailing Address 151 Holbrook Ln

City Briarcliff Manor State NY Zip Code 10510

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

Name of Employer IBM Occupation Software Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19424125**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1025 Old White Plains Road

City Mamaroneck State NY Zip Code 10543

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412021**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Janet Segal**

Mailing Address 19 Huguenot Drive

City Larchmont State NY Zip Code 10538

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

Name of Employer Four Winds Hospital Occupation Chief Operating Officer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 19 / 2012

**Transaction ID : C19389604**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Asif Shaikh**

Mailing Address 3823 N Tazewell St

City Arlington State VA Zip Code 22207

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

Name of Employer International Resources Group Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2012

**Transaction ID : C19415607**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Nadine N Shaoul**

Mailing Address 4 Plymouth Road

City Rye State NY Zip Code 10580

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420138**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence R. Shapiro MD**

Mailing Address 286 South Mountain Road

City State Zip Code  
New City NY 10956

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

Name of Employer Occupation  
Children's & Women's Physicans of West Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2012

**Transaction ID : C19384951**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Walter W Shmerler**

Mailing Address 5016 Theall Rd

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
None CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2012

**Transaction ID : C19395107**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Allen Siegel**

Mailing Address 1 Broadview Road

City State Zip Code  
Westport CT 06880

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2012

**Transaction ID : C19384244**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Allen Siegel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012
Mailing Address 1 Broadview Road		<b>Transaction ID : C19384241</b>
City Westport	State CT	Zip Code 06880
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer N/A	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00	

Full Name (Last, First, Middle Initial) <b>B. Deborah Silodor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2012
Mailing Address 376 Durham Rd.		<b>Transaction ID : C19393611</b>
City wyckoff	State NJ	Zip Code 07481
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Amalgamated Bank	Occupation attorney	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Daniel Simon</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 2 Columbus Avenue, Apt. 37C		<b>Transaction ID : C19391930</b>
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer none	Occupation none	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Simone**

Mailing Address 3 White Oak Circle

City State Zip Code  
Purchase NY 10577

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

Name of Employer Occupation  
Simone Development Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : C19412011**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Serra D Sippel**

Mailing Address 3619 15th St. NW

City State Zip Code  
Washington DC 20017

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

Name of Employer Occupation  
Center for Health and Gender Equity President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 26 / 2012

**Transaction ID : C19422252**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen J. Slade**

Mailing Address 444 North Capitol St NW. Ste 821

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation  
Davidoff Hutcher & Citron LLP Government Relations

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 25 / 2012

**Transaction ID : C19420509**

Amount of Each Receipt this Period  
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Arif A Soni**

Mailing Address 194 W. 15th St 2nd Floor

City State Zip Code  
Deer Park NY 11729

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

Name of Employer Occupation  
Metropolitan Construction Corp President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2012

**Transaction ID : C19411958**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gillian Sorensen**

Mailing Address 15 Central Park West #9C

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
United Nations Foundation Senior Advisor and National Advocate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393011**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 39 Park Road

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Occupation  
Forum Capital Partners Managing Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 23 / 2012

**Transaction ID : C19393037**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Susman**

Mailing Address 2001 Kirby Drive, Suite 603

City HOUSTON State TX Zip Code 77019

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

Name of Employer Susman Godfrey LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2012

**Transaction ID : C19385063**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harri V. Taranto**

Mailing Address 42 Kilmer Road

City Larchmont State NY Zip Code 10538

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

Name of Employer Symphony Capital LLC Occupation Investor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2012

**Transaction ID : C19423685**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Leon Tempelsman**

Mailing Address Leon Tempelsman & Son  
19 W. 44th St.

City New York State NY Zip Code 10036-5902

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

Name of Employer Leon Tempelsman & Son Occupation Business Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2012

**Transaction ID : C19419561**

Amount of Each Receipt this Period  
 1000.00

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

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

1600.00



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

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

FOR LINE NUMBER: PAGE 65 OF 119  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Louise Tezel**

Mailing Address 14 Waterside Close

City Eastchester State NY Zip Code 10709

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

Name of Employer Louise Tezel Occupation Realtor

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2012

**Transaction ID : C19384220**

Amount of Each Receipt this Period  
 15.00

1040.00

**B.** Full Name (Last, First, Middle Initial)  
**Laurie M. Tisch**

Mailing Address 834 Fifth Avenue 13B

City New York State NY Zip Code 10065

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

Name of Employer Laurie M Tisch Illumination Fund Occupation Arts Patron

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420199**

Amount of Each Receipt this Period  
 1500.00

3500.00

**C.** Full Name (Last, First, Middle Initial)  
**Laurie M. Tisch**

Mailing Address 834 Fifth Avenue 13B

City New York State NY Zip Code 10065

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

Name of Employer Laurie M Tisch Illumination Fund Occupation Arts Patron

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19434472**

Amount of Each Receipt this Period  
 1000.00

3500.00

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

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

2515.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Beth Tritter**

Mailing Address 1661 Harvard Street, NW

City Washington State DC Zip Code 20009

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

Name of Employer The Glover Park Group Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 03 / 2012

**Transaction ID : C19398492**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Yvonne Tropp**

Mailing Address 541 Clafin Avenue

City Mamaroneck State NY Zip Code 10543

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

Name of Employer U.S. Trust Occupation Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 24 / 2012

**Transaction ID : C19420101**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan A. Van Dolsen**

Mailing Address 29 Highland Rd.

City Rye State NY Zip Code 10580

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

Name of Employer None Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 14 / 2012

**Transaction ID : C19412008**

Amount of Each Receipt this Period  
 2000.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 29 Highland Rd.

City State Zip Code  
Rye NY 10580

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 14 / 2012

**Transaction ID : C19412009**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 8 Gracemere

City State Zip Code  
Tarrytown NY 10591

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 19 / 2012

**Transaction ID : C19419529**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Weinberg**

Mailing Address 42 Winfield Avenue

City State Zip Code  
Harrison NY 10528

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 19 / 2012

**Transaction ID : C19389610**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Mildred Weissman**

Mailing Address 81 Manursing Way

City Rye State NY Zip Code 10580

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2012

**Transaction ID : C19384225**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lucille Werlinich**

Mailing Address 18 Ponds Lane

City Purchase State NY Zip Code 10577

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

Name of Employer N/A Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 16 / 2012

**Transaction ID : C19412554**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**James Wolfensohn**

Mailing Address 1350 Avenue of the Americas, Suite

City New York State NY Zip Code 10019

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

Name of Employer Wolfensohn & Company Occupation CHMN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : C19371828**

Amount of Each Receipt this Period  
 2500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 69 OF 119  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**susan wolman**

Mailing Address 109 Argyle Avenue

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
solomon schechter school of Westcheste part time after school teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**216.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2012**

**Transaction ID : C19385055**

Amount of Each Receipt this Period  
**180.00**

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

Mailing Address 113 Grafton Street

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
UN Foundation Vice President for Public Policy

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

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

**Transaction ID : C19428021**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**DOROTHY ZUCH**

Mailing Address PO BOX 522

City State Zip Code  
PURCHASE NY 10577

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

Name of Employer Occupation  
Optimized Devices inc engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 03 / 2012**

**Transaction ID : C19398468**

Amount of Each Receipt this Period  
**500.00**

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

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

**930.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 119
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ginsburg Development LLC**

Mailing Address 100 Summit Lake Drive

City Valhalla State NY Zip Code 10595

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19395181**

Amount of Each Receipt this Period  
 1000.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 1 Rivercrest Lane

City Dobbs Ferry State NY Zip Code 10522

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

Name of Employer Occupation  
 Ginsburg Development LLC Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19434477**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
\*

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

Mailing Address 1 Rivercrest Lane

City Dobbs Ferry State NY Zip Code 10522

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

Name of Employer Occupation  
 Ginsburg Development LLC Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 27 / 2012

**Transaction ID : C19434476**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
\*

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 71 OF 119  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Del Bello Donnellan Weingarten**

Mailing Address **One North Lexington Avenue**

City **White Plains** State **NY** Zip Code **10601**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : C19419475**

Amount of Each Receipt this Period  
**1500.00**

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
**Alfred R Del Bello**

Mailing Address **4 Make Peace Hill**

City **Waccabuc** State **NY** Zip Code **10597**

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

Name of Employer Occupation  
**Del Bello Donnellan Weingarten** Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : C19419477**

Amount of Each Receipt this Period  
**750.00**

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Mark Weingarten**

Mailing Address **DelBello Donnellan Weingarten Wise**  
**1 North Lexington**

City **White Plains** State **NY** Zip Code **10601**

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

Name of Employer Occupation  
**DelBello Donnellan Weingarten Wise & W** Attorney

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 17 / 2012**

**Transaction ID : C19419480**

Amount of Each Receipt this Period  
**750.00**

**[MEMO ITEM]**  
\*

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

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

**1500.00**

**199470.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 119
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 430 South Capitol Street SE

City Washington State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
137.86

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : C19412670**

Amount of Each Receipt this Period  
7.64

\* In-Kind: Fundraising Services

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

7.64

7.64



**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 73 OF 119
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address **2000 WESTCHESTER AVENUE**

City **PURCHASE** State **NY** Zip Code **10577**

FEC ID number of contributing federal political committee. **C C00478099**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : C19420510**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Credit Union Legislative Action Council**

Mailing Address **601 Pennsylvania Ave, NW, Ste. 600**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : C19420502**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**4000.00**

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC**

Mailing Address **1750 NEW YORK AVE NW**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : C19420524**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**2500.00**

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

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

\_\_\_\_\_

**7500.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 119
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **2 BRIGHTON STREET  
2ND FLOOR**

City **BELMONT** State **MA** Zip Code **02478**

FEC ID number of contributing federal political committee. **C C00147975**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 01 / 2012**

**Transaction ID : C19427503**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees PAC**

Mailing Address **1550 Crystal Drive, Suite 300**

City **Arlington** State **VA** Zip Code **22202**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 27 / 2012**

**Transaction ID : C19395204**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ob-Gyns For Women's Health PAC**

Mailing Address **409 12th Street SW**

City **Washington** State **DC** Zip Code **20024**

FEC ID number of contributing federal political committee. **C C00364158**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 25 / 2012**

**Transaction ID : C19420527**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 119	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**Orthopedic PAC**

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2012

**Transaction ID : C19427505**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : C19420516**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**SIEMENS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 300 NEW JERSEY AVENUE, NW SUITE 1000

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00353797**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2012

**Transaction ID : C19420532**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 119
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Bank of America, NA**

Mailing Address 730 15th St NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**529.72**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2012**

**Transaction ID : C19434036**

Amount of Each Receipt this Period  
**22.53**

**B.** Full Name (Last, First, Middle Initial)  
**Bank of America, NA**

Mailing Address 730 15th St NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**529.72**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 31 / 2012**

**Transaction ID : C19434037**

Amount of Each Receipt this Period  
**21.87**

**C.** Full Name (Last, First, Middle Initial)  
**Citibank, N.A.**

Mailing Address PO Box 5870

City New York State NY Zip Code 10163

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**632.68**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2012**

**Transaction ID : C19409065**

Amount of Each Receipt this Period  
**30.21**

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

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

**74.61**

**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 77 OF 119
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Citibank, N.A.**

Mailing Address PO Box 5870

City State Zip Code  
New York NY 10163

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**632.68**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 31 / 2012**

**Transaction ID : C19433738**

Amount of Each Receipt this Period  
**31.22**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**31.22**

**105.83**

**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 78 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>7.95</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D511371</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 05 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>705.70</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D511395</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2012</b>
Mailing Address <b>PO Box 53852</b>		Amount of Each Disbursement this Period <b>7.95</b>
City <b>Phoenix</b> State <b>AZ</b> Zip Code <b>85072</b>	Purpose of Disbursement <b>Merchant Fees</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : D511441</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>721.60</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 606.17
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	Transaction ID : D511486
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 7.95
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	Transaction ID : D511494
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2012
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 911.86
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement Merchant Fees	Transaction ID : D511496
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1525.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 119			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Angel Kazeminejad</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 1523 Central Park Ave, #9D		Amount of Each Disbursement this Period 258.00 <b>Transaction ID : D511432</b>
City Yonkers State NY Zip Code 10710	Purpose of Disbursement Canvassing Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Angel Media &amp; Publishing Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 26 Snake Hill Rd D/B/A Rockland Review		Amount of Each Disbursement this Period 175.00 <b>Transaction ID : D511427</b>
City West Nyack State NY Zip Code 10994-1610	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ben Dumas</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 94 Bobby's Court		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D511444</b>
City Ridgefield State CT Zip Code 06877	Purpose of Disbursement Catering Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	733.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D511472</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D511493</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Beta Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 545 5th Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D511367</b>
City New York	State NY	
Zip Code 10017	Purpose of Disbursement Monthly Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Cancer Support Team</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 875 Mamaroneck Ave		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D511402</b>
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carlos Campoverde</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 64 Bruce Ave		Amount of Each Disbursement this Period 258.00 <b>Transaction ID : D511435</b>
City Yonkers State NY Zip Code 10705	Purpose of Disbursement Canvassing Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citibank, N.A.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address PO Box 5870		Amount of Each Disbursement this Period 34.89 <b>Transaction ID : D511359</b>
City New York State NY Zip Code 10163	Purpose of Disbursement Bank Service Charge	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	592.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Citibank, N.A.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address PO Box 5870		Amount of Each Disbursement this Period 22.31 <b>Transaction ID : D511489</b>
City New York	State NY	
Zip Code 10163	Purpose of Disbursement Bank Service Charge	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Deer Park Spring Water</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address PO Box 856192		Amount of Each Disbursement this Period 36.67 <b>Transaction ID : D511413</b>
City Louisville	State KY	
Zip Code 40285-6192	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 430 South Capitol Street SE		Amount of Each Disbursement this Period 7.64 <b>Transaction ID : D508112</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	66.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Diana Breen</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 94 Bobby's Ct		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D511446</b>
City Ridgefield	State CT	
Zip Code 06877	Purpose of Disbursement Catering Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 428 W 23rd St, #2B		Amount of Each Disbursement this Period 6500.00 <b>Transaction ID : D511365</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Campaign Management Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kimberly L. DiTomasso</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 428 W 23rd St, #2B		Amount of Each Disbursement this Period 6500.00 <b>Transaction ID : D511438</b>
City New York	State NY	
Zip Code 10011	Purpose of Disbursement Campaign Management Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Eastchester Irish-American Social Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>PO Box 85</b>		Amount of Each Disbursement this Period <b>250.00</b>
City <b>Eastchester</b>	State <b>NY</b> Zip Code <b>10709</b>	
Purpose of Disbursement <b>Journal Advertisement</b>	Candidate Name	<b>Transaction ID : D511409</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>PO BOX 1140</b>		Amount of Each Disbursement this Period <b>52.09</b>
City <b>Memphis</b>	State <b>TN</b> Zip Code <b>38101</b>	
Purpose of Disbursement <b>Deliveries</b>	Candidate Name	<b>Transaction ID : D511414</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>PO BOX 1140</b>		Amount of Each Disbursement this Period <b>104.00</b>
City <b>Memphis</b>	State <b>TN</b> Zip Code <b>38101</b>	
Purpose of Disbursement <b>Deliveries</b>	Candidate Name	<b>Transaction ID : D511415</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>406.09</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>06</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		06		2012
M M	/	D D	/	Y Y Y Y									
04		06		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>75.82</td> </tr> </table>		75.82			
City	State	Zip Code											
Memphis	TN	38101											
75.82													
Purpose of Disbursement Deliveries		Transaction ID : D511416											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>01</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		01		2012
M M	/	D D	/	Y Y Y Y									
05		01		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>50.26</td> </tr> </table>		50.26			
City	State	Zip Code											
Memphis	TN	38101											
50.26													
Purpose of Disbursement Deliveries		Transaction ID : D511425											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>01</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		01		2012
M M	/	D D	/	Y Y Y Y									
05		01		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>26.35</td> </tr> </table>		26.35			
City	State	Zip Code											
Memphis	TN	38101											
26.35													
Purpose of Disbursement Deliveries		Transaction ID : D511426											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	152.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>02</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		02		2012
M M	/	D D	/	Y Y Y Y									
04		02		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>17.47</td> </tr> </table>		17.47			
City	State	Zip Code											
Memphis	TN	38101											
17.47													
Purpose of Disbursement Deliveries		Transaction ID : D511369											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary		<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President													
State:	District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>02</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	04		02		2012
M M	/	D D	/	Y Y Y Y									
04		02		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>19.81</td> </tr> </table>		19.81			
City	State	Zip Code											
Memphis	TN	38101											
19.81													
Purpose of Disbursement Deliveries		Transaction ID : D511370											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary		<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President													
State:	District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. FEDEX</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>31</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		31		2012
M M	/	D D	/	Y Y Y Y									
05		31		2012									
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Memphis</td> <td>TN</td> <td>38101</td> </tr> </table>		City	State	Zip Code	Memphis	TN	38101	<table border="1"> <tr> <td>107.61</td> </tr> </table>		107.61			
City	State	Zip Code											
Memphis	TN	38101											
107.61													
Purpose of Disbursement Deliveries		Transaction ID : D511477											
Candidate Name		Category/Type											
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President				
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary		<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President													
State:	District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	144.89
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. FEDEX</b>		M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period
City	State	Zip Code
Memphis	TN	38101
Purpose of Disbursement	Category/ Type	60.09
Deliveries		<b>Transaction ID : D511478</b>
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. FEDEX</b>		M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address PO BOX 1140		Amount of Each Disbursement this Period
City	State	Zip Code
Memphis	TN	38101
Purpose of Disbursement	Category/ Type	24.75
Deliveries		<b>Transaction ID : D511479</b>
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>c. Ford Credit</b>		M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address PO Box 220564		Amount of Each Disbursement this Period
City	State	Zip Code
Pittsburgh	PA	15257-2564
Purpose of Disbursement	Category/ Type	297.00
Monthly Car Lease		<b>Transaction ID : D511475</b>
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	381.84
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Ford Credit</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address PO Box 220564		Amount of Each Disbursement this Period 297.00
City Pittsburgh	State PA	
Zip Code 15257-2564	Purpose of Disbursement Monthly Car Lease	Transaction ID : D511394
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Global Strategy Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 895 Broadway, 5th FL		Amount of Each Disbursement this Period 7500.00
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Research	Transaction ID : D511391
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Global Strategy Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 895 Broadway, 5th FL		Amount of Each Disbursement this Period 27250.00
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Polling	Transaction ID : D511392
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35047.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)  
**A. Impressive Paper and Envelope Company**

Mailing Address 139 East Prospect Avenue

City Mamaroneck State NY Zip Code 10543

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2012

Amount of Each Disbursement this Period: 6628.10

Transaction ID : D511387

Full Name (Last, First, Middle Initial)  
**B. Impressive Paper and Envelope Company**

Mailing Address 139 East Prospect Avenue

City Mamaroneck State NY Zip Code 10543

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2012

Amount of Each Disbursement this Period: 6682.22

Transaction ID : D511388

Full Name (Last, First, Middle Initial)  
**c. Impressive Paper and Envelope Company**

Mailing Address 139 East Prospect Avenue

City Mamaroneck State NY Zip Code 10543

Purpose of Disbursement Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 01 / 2012

Amount of Each Disbursement this Period: 977.12

Transaction ID : D511423

**SUBTOTAL** of Disbursements This Page (optional) ..... 14287.44

**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 91 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Impressive Paper and Envelope Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 139 East Prospect Avenue		Amount of Each Disbursement this Period 2899.13
City Mamaroneck State NY Zip Code 10543	Purpose of Disbursement Printing	
Candidate Name	Category/Type	<b>Transaction ID : D511424</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Irma Y. Drace</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 41 Western Ave		Amount of Each Disbursement this Period 1005.00
City Yonkers State NY Zip Code 10705	Purpose of Disbursement Canvassing Services	
Candidate Name	Category/Type	<b>Transaction ID : D511433</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Irma Y. Drace</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 41 Western Ave		Amount of Each Disbursement this Period 402.52
City Yonkers State NY Zip Code 10705	Purpose of Disbursement Travel, Meals reimbursement	
Candidate Name	Category/Type	<b>Transaction ID : D511434</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4306.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Irving S. Maldonado</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012		
Mailing Address 21 Bennett Ave			Amount of Each Disbursement this Period 1080.00		
City Yonkers	State NY	Zip Code 10701	Transaction ID : D511439		
Purpose of Disbursement Canvassing Services		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Irving S. Maldonado</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012		
Mailing Address 21 Bennett Ave			Amount of Each Disbursement this Period 370.00		
City Yonkers	State NY	Zip Code 10701	Transaction ID : D511440		
Purpose of Disbursement Travel, Meals Reimbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Irving S. Maldonado</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012		
Mailing Address 21 Bennett Ave			Amount of Each Disbursement this Period 652.50		
City Yonkers	State NY	Zip Code 10701	Transaction ID : D511418		
Purpose of Disbursement Canvassing Services		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2102.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Irving S. Maldonado</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 21 Bennett Ave		Amount of Each Disbursement this Period 157.03 <b>Transaction ID : D511419</b>
City Yonkers	State NY	
Zip Code 10701	Purpose of Disbursement Travel Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jessica Matheu</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 94 Bobby's Court		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D511442</b>
City Ridgefield	State CT	
Zip Code 06877	Purpose of Disbursement Catering Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kelly Watson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 84 Bobby's Court		Amount of Each Disbursement this Period 270.00 <b>Transaction ID : D511443</b>
City Ridgefield	State CT	
Zip Code 06877	Purpose of Disbursement Catering Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	727.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D511492</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D511422</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Keypost Realty Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address PO Box 8197		Amount of Each Disbursement this Period 1466.66 <b>Transaction ID : D511366</b>
City White Plains	State NY	
Zip Code 10602-8197	Purpose of Disbursement Office Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4399.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Leidy Herrera</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 354 Prescott St		Amount of Each Disbursement this Period 660.00
City Yonkers	State NY	
Zip Code 10701	Purpose of Disbursement Canvassing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Leidy Herrera</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 354 Prescott St		Amount of Each Disbursement this Period 80.00
City Yonkers	State NY	
Zip Code 10701	Purpose of Disbursement Travel Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Mack/Crouse Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 2001 N. Beauregard Suite 420		Amount of Each Disbursement this Period 2191.00
City Alexandria	State VA	
Zip Code 22311	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2931.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Mario W Margi</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2012
Mailing Address 152 Seminary Ave		Amount of Each Disbursement this Period 960.00 <b>Transaction ID : D511450</b>
City Yonkers	State NY	
Zip Code 10704	Purpose of Disbursement Canvassing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement MM / DD / YYYY 05 / 10 / 2012
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : D511448</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Membership Dues	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. National Herald, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2012
Mailing Address 37-10 30th Street		Amount of Each Disbursement this Period 264.00 <b>Transaction ID : D511404</b>
City Long Island City	State NY	
Zip Code 11101-2614	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1244.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. New Castle Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 39 Garden Ridge		Amount of Each Disbursement this Period 6,000.00 Transaction ID : D511398
City Chappaqua State NY Zip Code 10514	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. New Jersey/Rockland Jewish Media Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 1086 Teaneck Road		Amount of Each Disbursement this Period 312.00 Transaction ID : D511403
City Teaneck State NJ Zip Code 07666	Purpose of Disbursement Journal Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. New York State Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 461 Park Avenue South		Amount of Each Disbursement this Period 6,477.69 Transaction ID : D511482
City New York State NY Zip Code 10016	Purpose of Disbursement Voter File Access	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6914.69
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Software, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 1101 15th St NW Suite 500		Amount of Each Disbursement this Period 2850.00 <b>Transaction ID : D511368</b>
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Software License Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nina B. Lopes</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 28 Madeline Ave		Amount of Each Disbursement this Period 1140.00 <b>Transaction ID : D511480</b>
City Verplanck	State NY Zip Code 10596	
Purpose of Disbursement Canvassing Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nina B. Lopes</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 28 Madeline Ave		Amount of Each Disbursement this Period 289.95 <b>Transaction ID : D511481</b>
City Verplanck	State NY Zip Code 10596	
Purpose of Disbursement Travel, Meals Reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4279.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2012</b>
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period <b>3750.00</b>
City New Rochelle	State NY	
Zip Code 10804	Purpose of Disbursement Strategic Consulting Services	<b>Transaction ID : D511491</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2012</b>
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period <b>3750.00</b>
City New Rochelle	State NY	
Zip Code 10804	Purpose of Disbursement Strategic Consulting Services	<b>Transaction ID : D511364</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Noam Bramson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2012</b>
Mailing Address 201 Pinebrook Boulevard		Amount of Each Disbursement this Period <b>3750.00</b>
City New Rochelle	State NY	
Zip Code 10804	Purpose of Disbursement Strategic Consulting Services	<b>Transaction ID : D511421</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>11250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Pasquale Lagana</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 60 Haines Blvd		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : D511452</b>
City Port Chester	State NY	
Zip Code 10573	Purpose of Disbursement Canvassing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 162.63 <b>Transaction ID : D511449</b>
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 556.12 <b>Transaction ID : D511484</b>
City Owings Mills	State MD	
Zip Code 21117	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1318.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 31 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>109.13</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Fee	Category/Type	<b>Transaction ID : D511485</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 15 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>556.12</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : D511470</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 15 / 2012</b>
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period <b>84.13</b>
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Fee	Category/Type	<b>Transaction ID : D511471</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>749.38</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 257.21
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Taxes	Category/Type	<b>Transaction ID : D511488</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 69.00
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Fee	Category/Type	<b>Transaction ID : D511358</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 69.00
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll Fee	Category/Type	<b>Transaction ID : D511360</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	395.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2012</b>
Mailing Address <b>5304 McKinley Street</b>		Amount of Each Disbursement this Period <b>1927.90</b>
City <b>Bethesda</b>	State <b>MD</b>	
Zip Code <b>20814</b>	Purpose of Disbursement <b>Accounting Services</b>	<b>Transaction ID : D511372</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PCMS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 31 / 2012</b>
Mailing Address <b>5304 McKinley Street</b>		Amount of Each Disbursement this Period <b>2270.00</b>
City <b>Bethesda</b>	State <b>MD</b>	
Zip Code <b>20814</b>	Purpose of Disbursement <b>Accounting Services</b>	<b>Transaction ID : D511476</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Postmaster White Plains</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>170 Martine Avenue</b>		Amount of Each Disbursement this Period <b>15.00</b>
City <b>White Plains</b>	State <b>NY</b>	
Zip Code <b>10601</b>	Purpose of Disbursement <b>PO Box Renewal Fee</b>	<b>Transaction ID : D511417</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4212.90</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Raul Ricci</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address 11 Irenhyl Ave		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D511445</b>
City Port Chester	State NY	
Zip Code 10573	Purpose of Disbursement Catering Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Robert McCloskey</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address PO Box 182		Amount of Each Disbursement this Period 1005.00 <b>Transaction ID : D511451</b>
City Yonkers	State NY	
Zip Code 10703	Purpose of Disbursement Canvassing Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Rockland Community Bulletin</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 50 Melnick Drive		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D511400</b>
City Monsey	State NY	
Zip Code 10952	Purpose of Disbursement Journal Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1555.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 1608.47
City Hagerstown	State MD	
Zip Code 21741	Purpose of Disbursement Merchant Fees	Transaction ID : D511361
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 787.10
City Hagerstown	State MD	
Zip Code 21741	Purpose of Disbursement Merchant Fees	Transaction ID : D511453
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Susan Wesley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 120 Richbell Rd		Amount of Each Disbursement this Period 840.00
City Mamaroneck	State NY	
Zip Code 10543	Purpose of Disbursement Canvassing Services	Transaction ID : D511430
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3235.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Susan Wesley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 120 Richbell Rd		Amount of Each Disbursement this Period 124.52
City Mamaroneck	State NY	
Zip Code 10543	Purpose of Disbursement Travel Reimbursement	Transaction ID : D511431
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Frost Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 2737 Devonshire Place, NW #325		Amount of Each Disbursement this Period 7000.00
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Fundraising Consulting Services	Transaction ID : D511420
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Frost Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012
Mailing Address 2737 Devonshire Place, NW #325		Amount of Each Disbursement this Period 7000.00
City Washington	State DC	
Zip Code 20008	Purpose of Disbursement Fundraising Consulting Services	Transaction ID : D511363
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14124.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Frost Group</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 2737 Devonshire Place, NW #325		Amount of Each Disbursement this Period 7000.00
City Washington State DC Zip Code 20008	Category/Type	
Purpose of Disbursement Fundraising Consulting Services		Transaction ID : D511490
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Valhalla Schools Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address PO Box		Amount of Each Disbursement this Period 250.00
City Valhalla State NY Zip Code 10595	Category/Type	
Purpose of Disbursement Journal Advertisement		Transaction ID : D511412
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address PO BOX 489		Amount of Each Disbursement this Period 316.76
City Newark State NJ Zip Code 07101	Category/Type	
Purpose of Disbursement Cell Phone Service		Transaction ID : D511389
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7566.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address PO BOX 489		Amount of Each Disbursement this Period 278.60 <b>Transaction ID : D511473</b>
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Cell Phone Service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 350 Granite Street		Amount of Each Disbursement this Period 586.09 <b>Transaction ID : D511474</b>
City Braintree	State MA Zip Code 02184	
Purpose of Disbursement Office Phone Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 350 Granite Street		Amount of Each Disbursement this Period 586.13 <b>Transaction ID : D511393</b>
City Braintree	State MA Zip Code 02184	
Purpose of Disbursement Office Phone Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1450.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. White Plains Police Benevolent Associatio</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>PO Box 327</b>		Amount of Each Disbursement this Period <b>365.00</b> <b>Transaction ID : D511406</b>
City <b>White Plains</b>	State <b>NY</b>	
Zip Code <b>10605</b>	Purpose of Disbursement <b>Journal Advertisement</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. White Plains St. Patrick's Day Parade Cmt</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>45 Topland Road</b>		Amount of Each Disbursement this Period <b>200.00</b> <b>Transaction ID : D511411</b>
City <b>Hartsdale</b>	State <b>NY</b>	
Zip Code <b>10530</b>	Purpose of Disbursement <b>Journal Advertisement</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Women's Research &amp; Education Fund</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>Westchester Cnty Ofc for Women 112</b>		Amount of Each Disbursement this Period <b>200.00</b> <b>Transaction ID : D511401</b>
City <b>White Plains</b>	State <b>NY</b>	
Zip Code <b>10601</b>	Purpose of Disbursement <b>Awards Luncheon Tickets</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>765.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Yorktown Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address 1375 Walter Road		Amount of Each Disbursement this Period <b>400.00</b>
City Yorktown Heights	State NY Zip Code 10598	
Purpose of Disbursement Journal Advertisement	Candidate Name	<b>Transaction ID : D511396</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. YWCA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address 515 North Street		Amount of Each Disbursement this Period <b>250.00</b>
City White Plains	State NY Zip Code 10605	
Purpose of Disbursement Journal Advertisement	Candidate Name	<b>Transaction ID : D511405</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Postmaster White Plains</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2012</b>
Mailing Address 170 Martine Avenue		Amount of Each Disbursement this Period <b>90.00</b>
City White Plains	State NY Zip Code 10601	
Purpose of Disbursement Postage	Candidate Name	<b>Transaction ID : D511385</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 1154.17
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Credit Card Payment	Category/Type	<b>Transaction ID : D511374</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 45.00
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Membership Fee	Category/Type	<b>Transaction ID : D511386</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T OneNet Service</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address PO Box 830017		Amount of Each Disbursement this Period 25.00
City Baltimore	State MD Zip Code 21283-0017	
Purpose of Disbursement Telecommunication Services	Category/Type	<b>Transaction ID : D511375</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1154.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 119			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Cosi</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 1700 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 298.36
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Catering	Transaction ID : D511378
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Golden Carriage Limousine</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address PO Box		Amount of Each Disbursement this Period 137.03
City Rye	State NY	
Zip Code 10580	Purpose of Disbursement Travel	Transaction ID : D511383
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address PO BOX 489		Amount of Each Disbursement this Period 211.99
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Cell Phone Service	Transaction ID : D511377
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. XYZ Radio Cab</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2012
Mailing Address 41 Brooklyn Ave		Amount of Each Disbursement this Period 198.46
City Brooklyn	State NY	
Zip Code 11216	Purpose of Disbursement Travel	Transaction ID : D511376
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 2266.31
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Credit Card Payment	Transaction ID : D511455
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMTRAK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 60 Massachusetts Ave, NE		Amount of Each Disbursement this Period 774.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Travel	Transaction ID : D511457
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2266.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T OneNet Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 830017		Amount of Each Disbursement this Period 25.00
City Baltimore	State MD	
Zip Code 21283-0017	Purpose of Disbursement Telecommunication Services	Transaction ID : D511465 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bottle and Soul</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 1200 Lexington Ave		Amount of Each Disbursement this Period 346.46
City New York	State NY	
Zip Code 10028	Purpose of Disbursement Event Beverages	Transaction ID : D511456 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 339 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 69.74
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Travel	Transaction ID : D511467 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 119	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Hotels.com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 10440 North Central Expressway		Amount of Each Disbursement this Period 289.22
City Dallas State TX Zip Code 75231	Purpose of Disbursement Travel	
Candidate Name		Transaction ID : D511458
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. NY Party &amp; Linen Rentals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 1126 Grove St		Amount of Each Disbursement this Period 272.19
City Irvington State NJ Zip Code 07111	Purpose of Disbursement Event Supplies	
Candidate Name		Transaction ID : D511459
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. XYZ Radio Cab</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 41 Brooklyn Ave		Amount of Each Disbursement this Period 108.94
City Brooklyn State NY Zip Code 11216	Purpose of Disbursement Travel	
Candidate Name		Transaction ID : D511464
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 1445.52
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : D511469</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elijah Reichlin-Melnick</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address 26 Marion St.		Amount of Each Disbursement this Period 1445.52
City Nyack	State NY Zip Code 10960	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : D511502</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 100 Painters Mill Road PO Box 388		Amount of Each Disbursement this Period 1445.52
City Owings Mills	State MD Zip Code 21117	
Purpose of Disbursement Payroll	Category/Type	<b>Transaction ID : D511483</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2891.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 119			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Elijah Reichlin-Melnick</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012	
Mailing Address 26 Marion St.			Amount of Each Disbursement this Period 1445.52	
City Nyack	State NY	Zip Code 10960	Transaction ID : D511503	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012	
Mailing Address 100 Painters Mill Road PO Box 388			Amount of Each Disbursement this Period 850.94	
City Owings Mills	State MD	Zip Code 21117	Transaction ID : D511487	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>c. Elijah Reichlin-Melnick</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012	
Mailing Address 26 Marion St.			Amount of Each Disbursement this Period 850.94	
City Nyack	State NY	Zip Code 10960	Transaction ID : D511501	
Purpose of Disbursement Payroll		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	850.94
<b>TOTAL</b> This Period (last page this line number only).....	149401.95

**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 118 OF 119			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 12 / 2012</b>
Mailing Address <b>430 South Capitol Street SE</b>		Amount of Each Disbursement this Period <b>10526.00</b> <b>Transaction ID : D511454</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>Unlimited Transfer to a Party Committee</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 12 / 2012</b>
Mailing Address <b>430 South Capitol Street SE</b>		Amount of Each Disbursement this Period <b>10526.00</b> <b>Transaction ID : D511362</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>Unlimited Transfer to a Party Committee</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Eleanor Roosevelt Legacy Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 06 / 2012</b>
Mailing Address <b>PO Box 20293 Greeley Square Statio</b>		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D511397</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10001</b>	Purpose of Disbursement <b>Contribution</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>22052.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 119	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Ossining Democratic Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 27 / 2012</b>
Mailing Address <b>9 Stonegate Road</b>		Amount of Each Disbursement this Period <b>900.00</b> <b>Transaction ID : D511390</b>
City <b>Ossining</b> State <b>NY</b> Zip Code <b>10562</b>	Purpose of Disbursement <b>Unlimited Transfer to Party Committee</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Working Families Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2012</b>
Mailing Address <b>88 Third Avenue</b>		Amount of Each Disbursement this Period <b>1250.00</b> <b>Transaction ID : D511373</b>
City <b>Brooklyn</b> State <b>NY</b> Zip Code <b>11217</b>	Purpose of Disbursement <b>Unlimited Transfer to a Party Committee</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>24202.00</b>