

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 28 Pepperidge Road
 Check if different than previously reported. (ACC)
Tuxedo Park NY 10987

2. **FEC IDENTIFICATION NUMBER** C00476143
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
NY 19

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 01 01 2010 through 03 31 2010

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 David McFadden
Signature of Treasurer Electronically Filed by David McFadden Date 10 07 2010

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

David McFadden For Congress

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	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)).....	39995.00	39995.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	39995.00	39995.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	26249.69	26249.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	26249.69	26249.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	84170.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	70425.00	

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
David McFadden For Congress

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	34475.00	34475.00
(i) Itemized (use Schedule A).....	720.00	720.00
(ii) Unitemized.....	35195.00	35195.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	4800.00	4800.00
(d) The Candidate.....	39995.00	39995.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	70425.00	70425.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	70425.00	70425.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	110420.00	110420.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

4 / 19

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26249.69	26249.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	26249.69	26249.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	110420.00
25. SUBTOTAL (add Line 23 and Line 24).....	110420.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26249.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	84170.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

<p>A. Full Name (Last, First, Middle Initial) Barry Breeman</p> <p>Mailing Address 16 State School Rd</p> <p>City State Zip Code Warwick NY 10990</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Caribbean Properties Group Real Estate Exwcutive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2010</p> <p>Transaction ID: SA11AI.4120</p> <p>Amount of Each Receipt this Period 2400.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Pamela Breeman</p> <p>Mailing Address 16 State School Rd</p> <p>City State Zip Code Warwick NY 10990</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Caribbean Properties Group Real Estate Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2010</p> <p>Transaction ID: SA11AI.4119</p> <p>Amount of Each Receipt this Period 2400.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) John Casis</p> <p>Mailing Address 1016 5th Ave, apt # 6B</p> <p>City State Zip Code New York NY 10028</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cross Atlantic Partners Venture Capitalist</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">2400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2010</p> <p>Transaction ID: SA11AI.4099</p> <p>Amount of Each Receipt this Period 2400.00</p>
--	---

SUBTOTAL of Receipts This Page (optional)	7200.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.	Full Name (Last, First, Middle Initial) Sara Casis		Date of Receipt
	Mailing Address 1016 5th Ave, Apt#6B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 8 / 2 0 1 0
	City	State	Zip Code
	New York	NY	10028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4100
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2400.00

B.	Full Name (Last, First, Middle Initial) Brian Costello		Date of Receipt
	Mailing Address 5 Pine Hill Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 2 9 / 2 0 1 0
	City	State	Zip Code
	Tuxedo Park	NY	10987
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4117
Name of Employer Brimar Industries		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Philip De Lobkowicz		Date of Receipt
	Mailing Address 17 E89th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 2 9 / 2 0 1 0
	City	State	Zip Code
	New York	NY	10128
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4116
Name of Employer Babcock Brown		Occupation Consulting	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A. Full Name (Last, First, Middle Initial)
Averell Fisk

Mailing Address PO Box 38

City Arden State NY Zip Code 10910

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2010

Transaction ID: SA11AI.4111

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Gregory Gross

Mailing Address 4 Ridge Road

City Tuxedo Park State NY Zip Code 10987

FEC ID number of contributing federal political committee. C

Name of Employer Insurex Brokerage Occupation Insurance Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY
02 / 22 / 2010

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period 2400.00

C. Full Name (Last, First, Middle Initial)
Gregory Gross

Mailing Address 4 Ridge Road

City Tuxedo Park State NY Zip Code 10987

FEC ID number of contributing federal political committee. C

Name of Employer Insurex Brokerage Occupation Insurance Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
02 / 22 / 2010

Transaction ID: SA11AI.4103

Amount of Each Receipt this Period 600.00

SUBTOTAL of Receipts This Page (optional) 3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A. Full Name (Last, First, Middle Initial)
Sreve Hellman

Mailing Address 3 East 80th Street

City State Zip Code
New York NY 10075

FEC ID number of contributing federal political committee. C

Name of Employer Aspect Enterprise Solutions Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt M M / D D / Y Y Y Y
03 / 09 / 2010

Transaction ID: SA11AI.4107

Amount of Each Receipt this Period
2400.00

B. Full Name (Last, First, Middle Initial)
Sreve Hellman

Mailing Address 3 East 80th Street

City State Zip Code
New York NY 10075

FEC ID number of contributing federal political committee. C

Name of Employer Aspect Enterprise Solutions Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y
03 / 09 / 2010

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period
2400.00

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

Mailing Address 1088 Park Ave

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee. C

Name of Employer Warburg Pinkus, LLC Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt M M / D D / Y Y Y Y
03 / 04 / 2010

Transaction ID: SA11AI.4105

Amount of Each Receipt this Period
2400.00

SUBTOTAL of Receipts This Page (optional) 7200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

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

Mailing Address 1088 Park Ave

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee. C

Name of Employer Warburg Pinkus, LLC Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 04 / 2010
Transaction ID: SA11AI.4106

Amount of Each Receipt this Period 2400.00

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

Mailing Address 28 Pepperidge Rd

City State Zip Code
Tuxedo Park NY 10987

FEC ID number of contributing federal political committee. C

Name of Employer CFA, Inc Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4123

Amount of Each Receipt this Period 2375.00

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

Mailing Address 28 Pepperidge Rd

City State Zip Code
Tuxedo Park NY 10987

FEC ID number of contributing federal political committee. C

Name of Employer CFA, Inc Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 31 / 2010
Transaction ID: SA11AI.4124

Amount of Each Receipt this Period 2400.00

SUBTOTAL of Receipts This Page (optional) 7175.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A. Full Name (Last, First, Middle Initial)
Charles Neuhauser
Mailing Address 4 Stable Rd
City Tuxedo Park State NY Zip Code 10987
FEC ID number of contributing federal political committee. **C**
Name of Employer Mainwall Investment Management Occupation Investment manager
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) **500.00**
Date of Receipt 03 / 29 / 2010
Transaction ID: SA11AI.4115
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Chauncie Rodzianko
Mailing Address PO Box 757
City Tuxedo Park State NY Zip Code 10987
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) **300.00**
Date of Receipt 02 / 22 / 2010
Transaction ID: SA11AI.4104
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Anna Shaw
Mailing Address 126 Tower Hill Rd
City Tuxedo Park State NY Zip Code 10987
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) **500.00**
Date of Receipt 03 / 30 / 2010
Transaction ID: SA11AI.4121
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) **1300.00**
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A. Full Name (Last, First, Middle Initial)
Christian Sonne

Mailing Address 207 West Lake Rd

City State Zip Code
Tuxedo Park NY 10987

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

Name of Employer Occupation
None Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2010

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period
1000.00

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

Mailing Address 22 Mountain Farm Rd

City State Zip Code
Tuxedo Park NY 10987

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

Name of Employer Occupation
Interior Preservation Inc Owner

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2010

Transaction ID: SA11AI.4112

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Burton Weston

Mailing Address 1 Singley Court

City State Zip Code
Great Neck NY 10021

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

Name of Employer Occupation
Garfunkel Wild, PC Attorney

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2010

Transaction ID: SA11AI.4110

Amount of Each Receipt this Period
1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 12 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.

Full Name (Last, First, Middle Initial)
Andrew Yuder

Mailing Address 115 Central Park West

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
BB+T Capital Markets Finance Professional

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

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2010

Transaction ID: SA11AI.4109

Amount of Each Receipt this Period
2400.00

B.

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

Mailing Address 8 Wainwrite CT

City State Zip Code
Closter NJ 07624

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

Name of Employer Occupation
None Retired

Receipt For: 250" Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 29 / 2010

Transaction ID: SA11AI.4118

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	2650.00
TOTAL This Period (last page this line number only)	▶	34475.00

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

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

FOR LINE NUMBER: PAGE 13 / 19
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.

Full Name (Last, First, Middle Initial) David McFadden		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 28 Pepperidge RD		Transaction ID: SA11D.4138
City Tuxedo Park	State NY	Zip Code 10987
FEC ID number of contributing federal political committee. C H0NY19147		Amount of Each Receipt this Period 2400.00
Name of Employer	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 12400.00	

B.

Full Name (Last, First, Middle Initial) David McFadden		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 28 Pepperidge RD		Transaction ID: SA11D.4139
City Tuxedo Park	State NY	Zip Code 10987
FEC ID number of contributing federal political committee. C H0NY19147		Amount of Each Receipt this Period 2400.00
Name of Employer	Occupation CEO	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 14800.00	

SUBTOTAL of Receipts This Page (optional)	4800.00
TOTAL This Period (last page this line number only)	4800.00

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

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

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.	Full Name (Last, First, Middle Initial) David McFadden		Date of Receipt
	Mailing Address 28 Pepperidge RD		<input type="text" value="02"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tuxedo Park	NY	10987
	FEC ID number of contributing federal political committee.		Transaction ID: SA13A.4140
Name of Employer		Amount of Each Receipt this Period	
Occupation		<input type="text" value="10000.00"/>	
CEO			
Receipt For: 2010		Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) David McFadden		Date of Receipt
	Mailing Address 28 Pepperidge RD		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Tuxedo Park	NY	10987
	FEC ID number of contributing federal political committee.		Transaction ID: SA13A.4192
Name of Employer		Amount of Each Receipt this Period	
Occupation		<input type="text" value="60425.00"/>	
CEO			
Receipt For: 2010		Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="75225.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70425.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="70425.00"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 19

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

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.	Full Name (Last, First, Middle Initial) David Polyanski Mailing Address 200 East 62nd Street, Apt # 10C City New York State NY Zip Code 10065 Purpose of Disbursement Campaign consulting Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4182 Date of Disbursement 02 / 22 / 2010 Amount of Each Disbursement this Period 8000.00 Category/Type 003
B.	Full Name (Last, First, Middle Initial) Ken Kurson Mailing Address 5 Mapletown Rd, Suite 300 City Princetown State NJ Zip Code 08540 Purpose of Disbursement Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4191 Date of Disbursement 03 / 20 / 2010 Amount of Each Disbursement this Period 3267.00 Category/Type 006
C.	Full Name (Last, First, Middle Initial) Ken Kurson Mailing Address 5 Mapletown Rd, Suite 300 City Princetown State NJ Zip Code 08540 Purpose of Disbursement Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4188 Date of Disbursement 03 / 23 / 2010 Amount of Each Disbursement this Period 5000.00 Category/Type 006

SUBTOTAL of Disbursements This Page (optional) ▶

16267.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
David McFadden For Congress

A. Full Name (Last, First, Middle Initial) Matthew Richter <hr/> Mailing Address 30 North Broadway # 5D <hr/> City White Plains State NY Zip Code 10601 <hr/> Purpose of Disbursement Press Consulting Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4180 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type: 003
B. Full Name (Last, First, Middle Initial) Matthew Richter <hr/> Mailing Address 30 North Broadway # 5D <hr/> City White Plains State NY Zip Code 10601 <hr/> Purpose of Disbursement Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4190 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00 Category/Type: 003
C. Full Name (Last, First, Middle Initial) Star Jospe <hr/> Mailing Address West Lake Rd <hr/> City Tuxedo Park State NY Zip Code 10987 <hr/> Purpose of Disbursement Reimbursement Candidate Name David McFadden For Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.4186 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 894.69 Category/Type: 007

SUBTOTAL of Disbursements This Page (optional) ▶

7144.69

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 17 / 19

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

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

NAME OF COMMITTEE (In Full)
David McFadden For Congress

A.

Full Name (Last, First, Middle Initial)
Stephanie Brown

Mailing Address 2106 Minnesota Ave SE

City Washington State DC Zip Code 20020

Purpose of Disbursement
Campaign Consulting

Candidate Name
David McFadden For Congress

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2010
 Primary General
 Other (specify) ▼

003
Category/
Type

Transaction ID: SB17.4178
Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
Warwick Resource Group

Mailing Address 68 Main Street

City Warwick State NY Zip Code 10990

Purpose of Disbursement

Candidate Name
David McFadden For Congress

Office Sought: House
 Senate
 President
State: NY District: 19

Disbursement For: 2010
 Primary General
 Other (specify) ▼

007
Category/
Type

Transaction ID: SB17.4184
Date of Disbursement

02 / 23 / 2010

Amount of Each Disbursement this Period

338.00

SUBTOTAL of Disbursements This Page (optional) ►

2838.00

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

26249.69

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David McFadden For Congress

Transaction ID: SC/10.4140

LOAN SOURCE Full Name (Last, First, Middle Initial)
David McFadden - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 28 Pepperidge RD

City Tuxedo Park State NY ZIP Code 10987

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred: M M 0 2, D D 2 2, Y Y Y Y 2 0 1 0
Date Due: None
Interest Rate: 0.0000 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	10000.00
TOTALS This Period (last page in this line only)	▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
David McFadden For Congress

Transaction ID: SC/10.4192

LOAN SOURCE Full Name (Last, First, Middle Initial)
David McFadden - [PERSONAL FUNDS]

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 28 Pepperidge RD

City Tuxedo Park State NY ZIP Code 10987

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
60425.00	0.00	60425.00

TERMS

Date Incurred: M M 03 D D 31 Y Y Y Y 2010 Date Due: None Interest Rate: 0.0000 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	60425.00
TOTALS This Period (last page in this line only)	▶	70425.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.