

*New York State Board of Elections Compliance Unit*  
**Compliance Review Checklist – 2019 July Periodic Report**  
 Committee Type 1: Single Candidate Authorized Committee

<b>Committee Name and Filer ID #: 193; Hoylman For Senate</b>			
<b>Deficiencies Found: (D)*</b>	<b>YES</b>	<b>Reviewer Name:</b>	Bethany Hagadone
<b>Training Issues Found: (T) *</b>	<b>YES</b>	<b>Reviewer Contact Phone #:</b>	518-474-2063
<b>Compliant:</b>	<b>NO</b>	<b>Date of Review:</b>	December 27, 2021
<b>Report Information:</b>	Report period: <b>July Periodic</b>		Report year: 2019
	Date Range of report: 01/12/19 - 07/11/19		OHNT/TRMD: No
	Date Report Filed: July 15, 2019		Amendment: Yes
<b>Schedules Used in this report:</b>		<input checked="" type="checkbox"/> A <input checked="" type="checkbox"/> B <input checked="" type="checkbox"/> C <input checked="" type="checkbox"/> D <input type="checkbox"/> E <input checked="" type="checkbox"/> F <input type="checkbox"/> G <input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K <input checked="" type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q <input type="checkbox"/> R	

**Comments:**

**Monetary Contributions Received From All Other**

1. Contributions from Constantinople & Vallone Consulting Llc, Kasirer Consulting Llc, Willett Solutions Llc, and Bolton St Johns Llc are missing Ownership Allocations. Amend filing to include the allocation of the percentage of the contribution commensurate with the percentage ownership in the LLC.
2. Allison Lee Albany Strategic Advisors appears to be misreported. Please amend filing to include Contributor Type (i.e., Individual, Corporation, LLC, etc) and report this transaction under the appropriate transaction type.
3. Transport Workers Union Local 100 appears to be misreported as a PAC. Please amend filing to report this transaction as a Union.

REVIEW OF ALL SCHEDULES:		Y/N	D/T*	Instructions:	LIST SCHEDULES:
1.	Date Range of filed report incorrect	N	T	If Yes, must amend	
2.	Negative Balance	N	D	If Yes, must amend	
3.	Missing or incomplete names	N	D	If Yes, must amend	
4.	Missing or incomplete addresses	N	D	If Yes, must amend	
5.	Missing check #'s	N	D	If Yes, must amend	
6.	Missing or incomplete dates	N	D	If Yes, must amend	
7.	Missing amounts	N	D	If Yes, must amend	
8.	Cntrbs on this report in excess of election limit	N	D	If Yes, see FAQ sheet	
9.	Anonymous Contributions	N	D	If Yes, see FAQ sheet	
10.	Cash contribution greater than \$100	N	D	If Yes, see FAQ sheet	
11.	Raffles	N	D	If Yes, see FAQ sheet	
12.	Payments to individual/entity without itemization	N	T	If Yes, must amend	
13.	Incorrect use of schedule	N	T	If Yes, must amend	
14.	Reimbursements reported incorrectly	N	T	If Yes, must amend	
15.	Failed to provide Sch O breakdown for LLC cntrbs	Y	D	If Yes, must amend	

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<b>SCHEDULE A: INDIVIDUAL &amp; PARTNERSHIP CONTRIBUTIONS</b>				
16.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
17.	Incorrect use of contribution code	<b>N</b>	<b>T</b>	If Yes, please amend
18.	Joint contributions	<b>N</b>	<b>T</b>	If Yes, please amend
19.	Partnership contribution over \$2,500	<input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/> <b>Y</b>		If Yes, refer to Schedule O
20.	Contribution received from a non U.S. address	<b>N</b>	<b>D</b>	If Yes, see FAQ sheet
<b>SCHEDULE B: CORPORATE CONTRIBUTIONS</b>				
21.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
22.	Aggregate corporate cntrb > \$5,000 on this report	<b>N</b>	<b>D</b>	If Yes, must refund, see FAQ
23.	Contribution received from a non U.S. address	<b>N</b>	<b>D</b>	If Yes, see FAQ sheet
<b>SCHEDULE C: OTHER CONTRIBUTIONS</b>				
24.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
25.	Incorrect use of contribution code	<b>N</b>	<b>T</b>	If Yes, please amend
26.	Aggregate LLC contrb > than \$5,000 on this report	<b>N</b>	<b>D</b>	If Yes, must refund, see FAQ
<b>SCHEDULE D: IN-KIND CONTRIBUTIONS</b>				
27.	Incorrect use of schedule	<b>N</b>	<b>D</b>	If Yes, must amend
28.	Incorrect use of contribution code	<b>N</b>	<b>T</b>	If Yes, please amend
29.	Failed to provide amount of contribution	<b>N</b>	<b>D</b>	If Yes, must amend
30.	Failed to provide description of contribution	<b>N</b>	<b>D</b>	If Yes, must amend
<b>SCHEDULE E: OTHER RECEIPTS</b>				
31.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
32.	Failed to provide receipt type	<b>N</b>	<b>T</b>	If Yes, please amend
33.	Code: "OTHER" used without explanation	<b>N</b>	<b>T</b>	If Yes, please amend
<b>SCHEDULE F: EXPENDITURES</b>				
34.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
35.	Incorrect use of purpose code	<b>N</b>	<b>T</b>	If Yes, please amend
36.	Code: "OTHER" used without explanation	<b>N</b>	<b>T</b>	If Yes, please amend
37.	Cash expenditure greater than \$100	<b>N</b>	<b>T</b>	Cash expenditures > \$100 prohibited
38.	Wages/payroll payment failed to provide employee info	<b>N</b>	<b>D</b>	If Yes, must amend
39.	Reimbursements reported incorrectly	<b>N</b>	<b>T</b>	If Yes, please amend
40.	Payments to individual/entity without itemization	<b>N</b>	<b>D</b>	If Yes, must amend to provide itemization
41.	Reimbursement to candidate without explanation	<b>N</b>	<b>D</b>	If Yes, must amend to provide explanation
42.	Credit card payments without itemization	<b>N</b>	<b>D</b>	If Yes, must amend to provide itemization
43.	Credit card itemization reported incorrectly	<b>N</b>	<b>T</b>	If Yes, please amend
<b>SCHEDULE G: TRANSFERS IN</b>				
44.	Improper use of Transfers In schedule?	<b>N</b>	<b>D</b>	If Yes, must amend
<b>SCHEDULE H: TRANSFERS OUT</b>				
45.	Improper use of Transfers Out schedule?	<b>N</b>	<b>D</b>	If Yes, must amend
<b>SCHEDULE I: LOANS RECEIVED</b>				

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46.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
47.	Were any loans reported received?	<input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/> <b>Y</b>		If No, skip to next schedule
48.	Is the loan received from a lobbyist, PAC, IE Committee or Labor Union?	<b>N</b>	<b>D</b>	If Yes, must refund, see FAQ
49.	Failed to provide letter of indebtedness?	<b>N</b>	<b>D</b>	If Yes, must provide
50.	Failed to file corresponding Schedule N	<b>N</b>	<b>T</b>	If Yes, please file Schedule N

**SCHEDULE J: LOAN REPAYMENTS**

51.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
52.	Were any loans repaid?	<input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/> <b>Y</b>		If No, skip to next schedule
53.	Failed to file corresponding Sch I to disclose loan receipt?	<b>N</b>	<b>D</b>	If Yes, must amend
54.	Failed to provide letter of indebtedness for this loan?	<b>N</b>	<b>D</b>	If Yes, must provide
55.	Failed to provide original loan date	<b>N</b>	<b>D</b>	If Yes, must amend
56.	Failed to provide name and/or address of lender	<b>N</b>	<b>D</b>	If Yes, must amend
57.	Failed to provide check #	<b>N</b>	<b>D</b>	If Yes, must amend
58.	Failed to provide date repaid	<b>N</b>	<b>D</b>	If Yes, must amend
59.	Failed to provide amount paid	<b>N</b>	<b>D</b>	If Yes, must amend

**SCHEDULE K: LIABILITIES/LOANS FORGIVEN**

60.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
61.	Was a loan or liability forgiven?	<input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/> <b>Y</b>		If No, skip to next schedule
62.	Failed to provide date forgiven	<b>N</b>	<b>D</b>	If Yes, must amend
63.	Failed to provide original date of debt	<b>N</b>	<b>D</b>	If Yes, must amend
64.	Failed to provide name and/or address of creditor/ lender	<b>N</b>	<b>D</b>	If Yes, must amend
65.	Failed to provide amount forgiven	<b>N</b>	<b>D</b>	If Yes, must amend
66.	Failed to provide letter of forgiveness	<b>N</b>	<b>D</b>	If Yes, must supply letter of forgiveness
67.	Is amount forgiven greater than receiving limit?	<b>N</b>	<b>D</b>	If Yes, must amend

**SCHEDULE L: EXPENDITURE REFUNDS**

68.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
69.	Failed to provide date received	<b>N</b>	<b>T</b>	If Yes, please amend
70.	Failed to provide name and/or address of payor	<b>N</b>	<b>T</b>	If Yes, please amend
71.	Failed to provide original payment date	<b>N</b>	<b>T</b>	If Yes, please amend

**SCHEDULE M: CONTRIBUTION REFUNDS**

72.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
73.	Failed to provide the date of original contribution	<b>N</b>	<b>D</b>	If Yes, must amend
74.	Failed to provide the amount refunded	<b>N</b>	<b>D</b>	If Yes, must amend
75.	Failed to provide the date of refund	<b>N</b>	<b>D</b>	If Yes, must amend
76.	Failed to provide name and/or address of contributor	<b>N</b>	<b>D</b>	If Yes, must amend
77.	Failed to provide refund check #	<b>N</b>	<b>D</b>	If Yes, must amend

**SCHEDULE N: OUTSTANDING LOANS/LIABILITIES**

78.	Incorrect use of schedule	<b>N</b>	<b>T</b>	If Yes, please amend
79.	Failed to provide original loan/liability amount	<b>N</b>	<b>D</b>	If Yes, must amend
80.	Failed to provide amount still outstanding	<b>N</b>	<b>T</b>	If Yes, please amend
81.	Failed to use appropriate purpose codes	<b>N</b>	<b>T</b>	If Yes, please amend
82.	Failed to file corresponding Schedule I/ loans received	<b>N</b>	<b>D</b>	If Yes, must file Schedule I

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<b>SCHEDULE O: PARTNERS/SUBCONTRACTORS</b>				
83.	Partnership cntrb > \$2500 reported on Schedule A	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y	If No, skip to next schedule	
84.	LLC contributions reported on Schedule C	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y	If No, skip to next schedule	
85.	Subcontractor payments reported?	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y	If No, skip to next schedule	
86.	Failed to provide contribution date as reported on Sch A, C and/or D	<b>N</b>	T	If Yes, please amend
87.	Failed to provide contribution amt as reported on Sch A, C and/or D	<b>N</b>	T	If Yes, please amend
88.	Failed to provide partnership name and/or address	<b>N</b>	D	If Yes, must amend
89.	Failed to provide amount attributed to each partner	<b>N</b>	D	If Yes, must amend
90.	Failed to provide Sch O breakdown for all partnership cntrb > \$2500	<b>N</b>	D	If Yes, must amend
91.	Failed to provide LLC name and/or address	<b>N</b>	D	If Yes, must amend
92.	Failed to provide amount attributed to each LLC owner	<b>N</b>	D	If Yes, must amend
93.	Failed to provide Sch O breakdown for all LLC contributions	<b>N</b>	D	If Yes, must amend
<b>SCHEDULE P: NON-CAMPAIGN HOUSEKEEPING RECEIPTS</b>				
This committee is not eligible to use Schedule P				
94.	Incorrect use of Schedule P	<b>N</b>	T	If Yes, please amend
<b>SCHEDULE Q: NON-CAMPAIGN HOUSEKEEPING EXPENSES</b>				
This committee is not eligible to use Schedule Q				
95.	Incorrect use of Schedule Q	<b>N</b>	T	If Yes, please amend
<b>SCHEDULE R: EXPENSE ALLOCATION AMONG CANDIDATES</b>				
This committee is not eligible to use Schedule R				
96.	Incorrect use of Schedule R	<b>N</b>	T	If Yes, please amend
<b>MISCELLANEOUS</b>				
97.		<b>N</b>		