

New York State Board of Elections Compliance Unit
Compliance Review Checklist – 2021 July Periodic Report
 Committee Type 1: Single Candidate Authorized Committee

Committee Name and Filer ID #: 5380 - Friends Of Judy Pascale			
Deficiencies Found: (D)*	YES	Reviewer Name:	Laurie Barone
Training Issues Found: (T) *	YES	Reviewer Contact Phone #:	518-474-2063
Compliant:	NO	Date of Review:	October 26, 2021
Report Information:	Report period: July Periodic		Report year: 2021
	Date Range of report: 01/12/21 - 07/11/21		OHNT/TRMD: No
	Date Report Filed: July 14, 2021		Amendment: No

COMMENTS: You have reported contributions from LLCs/PLLCs. (Anette Eaderesto LLC)

Beginning January 31, 2019, all contributions made to a campaign or political committee by an LLC/PLLC must be attributed to each member of the LLC in proportion to the member's ownership interest in the company. To do so, upon receipt of a contribution of *any amount* from a Limited Liability Company (LLC, including PLLCs), the contribution must first be disclosed, and then **allocated** on the applicable filing. It is incumbent upon the treasurer to obtain all the required information from the contributing LLC. That includes the name(s), address(es), and percent ownership in the LLC/PLLC (in order to calculate how much of the total contribution is attributed to each owner). **Must amend this filing to include the required information.**

Missing address for Friends of Jim Mazzarella and Ray Tierney for Suffolk DA, please amend to provide.

Missing check number for Mastic Beach fire Department, please amend to provide.

Payment to individual without itemization for Michael Schlosberg, please amend to provide reimbursement detail. What vendor was used.

REVIEW OF ALL TRANSACTION TYPES:		Y/N	D/T*	Instructions:
1.	Date Range of filed report incorrect	N	T	If Yes, see comment(s) above
2.	Negative Balance	N	D	If Yes, see comment(s) above
3.	Missing or incomplete names	N	D	If Yes, see comment(s) above
4.	Missing or incomplete addresses	Y	T	If Yes, see comment(s) above
5.	Missing check #'s	Y	T	If Yes, see comment(s) above
6.	Anonymous Contributions	N	D	If Yes, see FAQ sheet and Comment(s) above
7.	Cash contribution greater than \$100	N	D	If Yes, see FAQ sheet and Comment(s) above
8.	Raffles	N	D	If Yes, see FAQ sheet and Comment(s) above
9.	Payments to individual/entity without itemization	Y	T	If Yes, see comment(s) above
10.	Incorrect use of transaction type	N	T	If Yes, see comment(s) above
11.	Failed to provide allocation for all LLC/PLLC contrbs	Y	D	If Yes, see comment(s) above

New York State Board of Elections Compliance Unit
Compliance Review Checklist – 2021 July Periodic Report
 Committee Type 1: Single Candidate Authorized Committee

MONETARY CONTRIBUTIONS RECEIVED FROM IND. & PART. (old Schedule A)				
12.	Incorrect use of transaction type	N	T	If Yes, please amend
13.	Incorrect use of contribution code	N	T	If Yes, please amend
14.	Joint contributions	N	T	If Yes, please amend
15.	Failed to provide Part. allocation for contrb > \$2,500	N	D	If Yes, must amend
16.	Contribution received from a non U.S. address	N	D	If Yes, see FAQ sheet
MONETARY CONTRIBUTIONS RECEIVED FROM CORPORATION (old Schedule B)				
17.	Incorrect use of transaction type	N	T	If Yes, please amend
18.	Aggregate corporate cntrb > \$5,000 on this report	N	D	If Yes, must refund, see FAQ
19.	Contribution received from a non U.S. address	N	D	If Yes, see FAQ sheet
MONETARY CONTRIBUTIONS RECEIVED FROM ALL OTHER (old Schedule C)				
20.	Incorrect use of transaction type	N	T	If Yes, please amend
21.	Incorrect use of contribution code	N	T	If Yes, please amend
22.	Aggregate LLC cntrb > \$5,000 on this report	N	D	If Yes, must refund, see FAQ
23.	Failed to provide allocation for LLC/PLLC contribution(s)	N	D	If Yes, must amend
IN-KIND (NON-MONETARY) CONTRIBUTIONS RECEIVED (old Schedule D)				
24.	Incorrect use of transaction type	N	D	If Yes, must amend
25.	Incorrect use of contribution code	N	T	If Yes, please amend
26.	Failed to provide description of contribution	N	D	If Yes, must amend
OTHER RECEIPTS RECEIVED (old Schedule E)				
27.	Incorrect use of transaction type	N	T	If Yes, please amend
28.	Code: "OTHER" used without explanation	N	T	If Yes, please amend
EXPENDITURES/PAYMENTS (old Schedule F)				
29.	Incorrect use of transaction type	N	T	If Yes, please amend
30.	Incorrect use of purpose code	N	T	If Yes, please amend
31.	Code: "OTHER" used without explanation	N	T	If Yes, please amend
32.	Cash expenditure greater than \$100	N	T	Cash expenditures > \$100 prohibited
33.	Wages/payroll payment failed to provide employee info	N	D	If Yes, must amend
34.	Payments to individual/entity without itemization	N	D	If Yes, must amend to provide itemization
35.	Reimbursement to candidate without explanation	N	D	If Yes, must amend to provide explanation
36.	Credit card payments without itemization	N	D	If Yes, must amend to provide itemization
TRANSFERS IN (old Schedule G)				
37.	Improper use of Transfers In schedule?	N	D	If Yes, must amend
TRANSFERS OUT (old Schedule H)				
38.	Improper use of Transfers Out schedule?	N	D	If Yes, must amend
LOANS RECEIVED (old Schedule I)				
39.	Incorrect use of transaction type	N	T	If Yes, please amend
40.	Were any loans reported received?	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y		If No, skip to next transaction type
41.	Is the loan received from a lobbyist, PAC, IE Committee or Labor Union?	N	D	If Yes, must refund, see FAQ

New York State Board of Elections Compliance Unit
Compliance Review Checklist – 2021 July Periodic Report
 Committee Type 1: Single Candidate Authorized Committee

42.	Failed to provide letter of indebtedness?	N	D	If Yes, must provide
LOAN REPAYMENTS (old Schedule J)				
43.	Incorrect use of transaction type	N	T	If Yes, please amend
44.	Were any loans repaid?	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y		If No, skip to next transaction type
45.	Failed to provide letter of indebtedness for this loan?	N	D	If Yes, must provide
46.	Failed to provide name and/or address of lender	N	D	If Yes, must amend
47.	Failed to provide check #	N	D	If Yes, must amend
LIABILITIES/LOANS FORGIVEN (old Schedule K)				
48.	Was a loan or liability forgiven?	<input checked="" type="checkbox"/> N <input type="checkbox"/> Y		If No, skip to next transaction type
49.	Failed to provide name and/or address of creditor/ lender	N	D	If Yes, must amend
50.	Failed to provide letter of forgiveness	N	D	If Yes, must supply letter of forgiveness
EXPENDITURE REFUNDS (Increases Balance) (old Schedule L)				
51.	Incorrect use of transaction type	N	T	If Yes, please amend
52.	Failed to provide name and/or address of payor	N	T	If Yes, please amend
CONTRIBUTION REFUNDS (Decreases Balance) (old Schedule M)				
53.	Incorrect use of transaction type	N	T	If Yes, please amend
54.	Failed to provide name and/or address of contributor	N	D	If Yes, must amend
55.	Failed to provide refund check #	N	D	If Yes, must amend
OUTSTANDING LIABILITIES/LOANS (old Schedule N)				
56.	Incorrect use of transaction type	N	T	If Yes, please amend
57.	Failed to provide name and/or address of creditor	N	D	If Yes, must amend
58.	Failed to use appropriate purpose codes	N	T	If Yes, please amend
MISCELLANEOUS				
59.		N		