Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 2023	0153			Rep File			CAI	NDI	DATE		COM	AITTEE	Y	LOE	PIT	31	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		MAK	ΈTΙ	HE RO	DAD A	CTI	ON IN	DEPI	NDENT	EXPEN	DITURE	COM	MIT	ГЕЕ	
Street Address:	449 TROUTMA	AN ST,S	TE C															
City:	BROOKLYN							State	: :	NY			Zip Co	de: 1	1237			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2		30 DA PRIMA		F	POST-	3.		AMENDI REPORT		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5		30 DA		P	OST-	6.		TERMINA REPORT		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2023					IG ME					PAPER		/	DI	SKETTI	E
Name of Office S	ought by Candida	te:			-			DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Pa	rty C	Code Co	
								МО		DAY	Y	EAR		·	ТО	Ή	•	
									11		7	2023		(SEE IN	ISTRUCT	IONS	FOR COD	ES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО		DAY	Y	EAR	FC	R OFFI	CE US	E ON	ILY	
expenditures	irom:		6 6	2	023	T	0		9	:	18	2023						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$					0.00						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Scho	edule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$					0.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$				97,9	938.60						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00						
				AFF	IDA	VI٦	ΓSE	CTIC	NC									
I swear (or affirm)	s a Committee report, incl	*	_							-		_		f my kno	wledge	and	belief ,	true
correct and comple	ete. cribed before me this																	
	day of	•	_ 20									Signature	of Perso	n Submit	ting Re	port		
	Signatu	re					-						Prin	ted Nam	e			
My Commission Ex	· —						_		•				Ema					
	MO		AY	YR		_					ea Co	de	Daytin	ne Telepi	none N	umbe	er	
	a report of a cand that to the best of n					•						ıv nrovis	ions of th	e act of J	une 3.º	937	(P.L. 13	33.
No 320) as amende		,	-		,							-,					(
Sworn to and Subsc	day of		20									s	ignature (of Candid	ate			
							-						Printe	ed Name				_
My Commission Exp	Signature ires						-						Ema	il				-
	мо	D	AY	YR			•			Area	Code		D	aytime T	elepho	ne N	umber	$-\mid$

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MAKE THE ROAD ACTION INDEPENDENT EXPENDITURE COMMITTEE	From:	<u>6/6/202</u>	<u>3</u> To:	9/18/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL\$ 0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee of Candidate				oorting P m:	eriod):		
					DATE		Al	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	me of Filing Committee or Candidate				orting Pe	riod				
				Fror	n:		To	То:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 0.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Co	ame of Filing Committee or Candidate			ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
MAKE THE ROAD ACTION INDEPENDENT EXPENDITURE COMMITTEE	From:	<u>6/6/2023</u> To:	9/18/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	97,938.60
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	97,938.60

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ame of Filing Committee or Candidate						
	F						
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

 Name of Filing Committee or Candidate
 Reporting Period

 MAKE THE ROAD ACTION INDEPENDENT EXPENDITURE COMMITTEE
 From: 6/6/2023
 To: 9/18/2023

						DATE		AMOUNT		
Full Name of Contributor MINUTEMAN PRESS					мо	DAY	YEAR			
Mailing Address 932 E HUNTII	NG PARK AVENUE							\$ 3,018.60		
City PHILADELPHIA	State		Zip Code(Plu	s 4)	9	8	2023			
	PA		19124							
Employer of Contributor	•		•		Occupat	ion				
nployer Mailing Address/Principal Place of City State Zip Code(Plusiness					Code(Plus	IN-KIND PRINTING IN SUPPORT OF RUE LANDAU ISAIAH THOMAS NICHOLA O'ROURKE AND KENDRA BROOKS				
Full Name of Contributor MAKE THE ROAD ACTION (C4)					мо	DAY	YEAR			
Mailing Address 443 TROUTM	AN ST STE C							\$ 94,920.00		
	State		Zip Code(Plu	s 4)	9	8	2023			
City BROOKLYN	NY		11237	·						
City BROOKLYN Employer of Contributor			'		Occupat	ion				
DIOOKEIN	NY	City	11237	tate		ion Code(Plus		otion of Contribution		
Employer of Contributor Employer Mailing Address/Princi	NY	City	11237		Zip		IN-KIN SUPPO ISAIAH	D STAFF TIME IN RT OF RUE LANDAU I THOMAS NICHOLAS RKE AND KENDRA		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporting Period						
			From			То:	
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
-							PAGE TOTAL
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00