

# 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

Zeldin For Congress

ADDRESS (number and street)

47 Flintlock Drive

Check if different than previously reported. (ACC)

Shirley

NY

11967

2. FEC IDENTIFICATION NUMBER ▼

C C00552547

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

NY

01

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

/  /

through

/  /

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 Nancy Marks

Signature of Treasurer Nancy Marks

[Electronically Filed]

Date

/  /

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 |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Zeldin For Congress**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 115795.45               | 850387.63                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 115795.45               | 850387.63                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 129046.39               | 714029.01                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 129046.39               | 714029.01                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 136358.62               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**Zeldin For Congress**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>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).....   | 74435.00                              | 685857.20                                  |
| (ii) Unitemized.....   | 10860.45                              | 73598.26                                   |
| (iii) TOTAL of contributions from individuals ▶  | 85295.45                              | 759455.46                                  |
| (b) Political Party Committees.....  | 18500.00                              | 29556.80                                   |
| (c) Other Political Committees (such as PACs).....   | 12000.00                              | 61375.37                                   |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 115795.45                             | 850387.63                                  |
| <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                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 115795.45                             | 850387.63                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 129046.39                     | 714029.01                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 129046.39                     | 714029.01                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 149609.56 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 115795.45 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 265405.01 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 129046.39 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 136358.62 |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 5 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Irene Alter**

Mailing Address 143 Shrub Hollow Road

City Roslyn State NY Zip Code 11576

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : SA11AI.9394**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Balistreri**

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

Name of Employer Suffolk County Sheriff's Office Occupation Deputy Sheriff

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **330.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : SA11AI.8934**

Amount of Each Receipt this Period  
**14.00**

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Beattie**

Mailing Address 74 Leonard Street

City Wading Rlver State NY Zip Code 11792

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

Name of Employer Tekmark Occupation Computer Programmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.8906**

Amount of Each Receipt this Period  
**100.00**

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

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

**214.00**

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bradford Bernstein**

Mailing Address 40 Old House Lane

City Sands Point State NY Zip Code 11050

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

Name of Employer Law Offices of Spar Bernstein Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8727**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 833 South Country Rd

City East Patchogue State NY Zip Code 11772

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

Name of Employer Oar House Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.9060**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 304 Dolphin Lane

City West Babylon State NY Zip Code 11704

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

Name of Employer LI Nail and Skin Institute Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8737**

Amount of Each Receipt this Period  
 1500.00

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

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

4600.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Guiseppe Cecchi</b>  |                                  | Date of Receipt<br>MM / DD / YYYY<br>06 / 05 / 2014 |
| Mailing Address 1700 N Moore St   |                                  | <b>Transaction ID : SA11AI.9183</b>                 |
| City<br>Arlington   | State<br>VA                      |   |
| Zip Code<br>22209   |                                  | Amount of Each Receipt this Period<br>500.00        |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>IDI Group Companies   | Occupation<br>President          |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |   |

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Rita Clous</b>   |                                  | Date of Receipt<br>MM / DD / YYYY<br>06 / 17 / 2014 |
| Mailing Address 4 Hylser Ct   |                                  | <b>Transaction ID : SA11AI.8826</b>                 |
| City<br>Coram   | State<br>NY                      |   |
| Zip Code<br>11727   |                                  | Amount of Each Receipt this Period<br>200.00        |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>200.00        |
| Name of Employer<br>Douglas Elliman Real Estate   | Occupation<br>Realtor            |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>320.00 |   |

|   |                                  |   |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Michael Cocco</b>  |                                  | Date of Receipt<br>MM / DD / YYYY<br>06 / 13 / 2014 |
| Mailing Address 5 Beacon Hill Dr  |                                  | <b>Transaction ID : SA11AI.8857</b>                 |
| City<br>Stonybrook  | State<br>NY                      |   |
| Zip Code<br>11790   |                                  | Amount of Each Receipt this Period<br>250.00        |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer<br>Friends of Maria Mattera  | Occupation<br>Campaign staff     |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 950.00 |
| <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 8 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cohen & Slamowitz LLP**

Mailing Address 199 Crossways Park Drive

City Woodbury State NY Zip Code 11797

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8762**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Cuchel**

Mailing Address 875 Bryant Ave

City Roslyn State NY Zip Code 11576

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : SA11AI.9064**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael D'Alessio**

Mailing Address 12 Water St Suite 204

City White Plains State NY Zip Code 10601

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

Name of Employer Occupation  
Self Employed Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8756**

Amount of Each Receipt this Period  
 1000.00

**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 9 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 88 Central Park West

City State Zip Code  
New York NY 10029

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8816**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Dilandro**

Mailing Address 99 Whippoorwill Lane

City State Zip Code  
East Quogue NY 11942

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

Name of Employer Occupation  
Ocean Electric Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.8808**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 116 Stuart Avenue

City State Zip Code  
Amityville NY 11701

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

Name of Employer Occupation  
Sunrise Credit Services Inc Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.9072**

Amount of Each Receipt this Period  
1500.00

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

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

2750.00

**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 10 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                         |   |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Barry Dorf</b>  |                         | Date of Receipt<br>MM / DD / YYYY<br>06 / 05 / 2014 |
| Mailing Address 62 S Second Street  |                         | <b>Transaction ID : SA11AI.8836</b>                 |
| City<br>Deer Park   | State<br>NY             |   |
| Zip Code<br>11729   |                         | Amount of Each Receipt this Period<br>200.00        |
| FEC ID number of contributing federal political committee.<br>C   |                         | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>Dorf Assoc  | Occupation<br>President |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date  |   |

|   |                        |   |
|---|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>John Dworkin</b>  |                        | Date of Receipt<br>MM / DD / YYYY<br>06 / 14 / 2014 |
| Mailing Address 117 Northside Dr  |                        | <b>Transaction ID : SA11AI.8814</b>                 |
| City<br>Sag Harbor  | State<br>NY            |   |
| Zip Code<br>11963   |                        | Amount of Each Receipt this Period<br>250.00        |
| FEC ID number of contributing federal political committee.<br>C   |                        | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer<br>Self Employed--Letter Sent  | Occupation<br>Attorney |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date |   |

|   |                        |   |
|---|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>Lynda Edwards</b>   |                        | Date of Receipt<br>MM / DD / YYYY<br>06 / 17 / 2014 |
| Mailing Address P.O. Box 543  |                        | <b>Transaction ID : SA11AI.8890</b>                 |
| City<br>Amagansett  | State<br>NY            |   |
| Zip Code<br>11930   |                        | Amount of Each Receipt this Period<br>100.00        |
| FEC ID number of contributing federal political committee.<br>C   |                        | Amount of Each Receipt this Period<br>650.00        |
| Name of Employer<br>Retired   | Occupation<br>Retired  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 550.00 |
| <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 11 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lynda Edwards**

Mailing Address P.O. Box 543

City Amagansett State NY Zip Code 11930

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : SA11AI.9034**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Wilma Edwards**

Mailing Address POBox 2948

City Del Mar State CA Zip Code 92014

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : SA11AI.9308**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Engel**

Mailing Address 1075 Park Avenue #5D

City New York State NY Zip Code 10128

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

Name of Employer Info Requested Sent Letter Occupation Info Requested Sent Letter

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 15 / 2014**

**Transaction ID : SA11AI.8706**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1300.00**

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond Farrell**

Mailing Address 37 Taylor Rd

City State Zip Code  
Huntington Bay NY 11743

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

Name of Employer Occupation  
Carter Deluca Farrell Schmidt Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.8802**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 92 Wheatley Rd

City State Zip Code  
Old Westbury NY 11568

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.8870**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Erin Ferrara**

Mailing Address 4 Townsend Ave

City State Zip Code  
Hartsdale NY 10530

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

Name of Employer Occupation  
Brittanys Beauty School Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8765**

Amount of Each Receipt this Period  
1000.00

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

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

3850.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Ferrara**

Mailing Address 6 Shorewood Dr

City Sands Point State NY Zip Code 11050

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

Name of Employer Midway Paris Beauty School Occupation Beautician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : SA11AI.8834**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Fiore**

Mailing Address P.O. Box 647

City Saddle River State NJ Zip Code 07458

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

Name of Employer Capri Beauty School Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11AI.8841**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Dorette Forman**

Mailing Address 130 Shore Rd

City Port Washington State NY Zip Code 11050

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8719**

Amount of Each Receipt this Period  
2600.00

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

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

3100.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dorette Forman**

Mailing Address 130 Shore Rd

City Port Washington State NY Zip Code 11050

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8721**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Jessica Forman**

Mailing Address 130 Shore Rd

City Port Washington State NY Zip Code 11050

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8712**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Jessica Forman**

Mailing Address 130 Shore Rd

City Port Washington State NY Zip Code 11050

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8714**

Amount of Each Receipt this Period  
2200.00

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

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

7400.00

**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 15 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Mario Mattera**

Mailing Address P.O. Box 2

City State Zip Code  
St James NY 11780

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11AI.8855**

Amount of Each Receipt this Period  
250.00

Monies from permissible funds

**B.** Full Name (Last, First, Middle Initial)  
**Susan Frohnhoefer**

Mailing Address 27 Corwell Avenue

City State Zip Code  
Riverhead NY 11901

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : SA11AI.8935**

Amount of Each Receipt this Period  
14.00

**C.** Full Name (Last, First, Middle Initial)  
**Susan Frohnhoefer**

Mailing Address 27 Corwell Avenue

City State Zip Code  
Riverhead NY 11901

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
222.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8902**

Amount of Each Receipt this Period  
14.00

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

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

278.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Frohnhoefer**

Mailing Address 27 Corwell Avenue

City Riverhead State NY Zip Code 11901

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **242.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.8867**

Amount of Each Receipt this Period  
**20.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jay Fund**

Mailing Address 12 Seminole Ave

City Massapequa State NY Zip Code 11758

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

Name of Employer Info Requested---Letter Sent Occupation Info Requested---Letter Sent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.8859**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**G.M O'Shea Proeperties LLC**

Mailing Address 4155 Veterans Highway Suite #9

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8752**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1520.00**

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerald M O'Shea**

Mailing Address 131 Ocean Grande Blvd  
Suite 9

City State Zip Code  
Jupiter FL 33477

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

Name of Employer Occupation  
O'Shea Properties Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2014

**Transaction ID : SA11AI.8752.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Terrance Gagliardo**

Mailing Address P.O. Box 23-42

City State Zip Code  
Ronkonkoma NY 11779

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

Name of Employer Occupation  
NY Institute of Beauty Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2014

**Transaction ID : SA11AI.8732**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 47 Van Buren Street

City State Zip Code  
Port Jefferson Station NY 11776

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

Name of Employer Occupation  
PLG, LLP CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
790.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : SA11AI.8878**

Amount of Each Receipt this Period  
140.00

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

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

1140.00

**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 18 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Stephen Giammarese</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014 |  |
| Mailing Address 47 Van Buren Street   |                                  | <b>Transaction ID : SA11AI.9075</b>                      |  |
| City<br>Port Jefferson Station  | State<br>NY                      | Zip Code<br>11776  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>100.00             |  |
| Name of Employer<br>PLG, LLP  | Occupation<br>CPA                |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>890.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paul Grenauer</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 12 / 2014 |  |
| Mailing Address 6550 Conner Rd  |                                  | <b>Transaction ID : SA11AI.8909</b>                      |  |
| City<br>East Amherst  | State<br>NY                      | Zip Code<br>14051  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>Excuria Spa   | Occupation<br>Salon              |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Michael Halmon</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 12 / 2014 |  |
| Mailing Address 3899 Crescent Cove Pl   |   | <b>Transaction ID : SA11AI.8853</b>                      |  |
| City<br>Tarpon Springs  | State<br>FL                               | Zip Code<br>34688  |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>Info Requested--Letter Sent   | Occupation<br>Info Requested--Letter Sent |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00          |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 600.00      |
| <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:<br>(check only one)   | PAGE 19 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Peter Hein</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2014 |  |
| Mailing Address 101 Central Park West # 14-E  |                                   | <b>Transaction ID : SA11AI.9155</b>                      |  |
| City<br>New York  | State<br>NY                       | Zip Code<br>10023  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>Wachtell Lipton Rosen & Katz  | Occupation<br>Attorney            |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Stephen Held</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 18 / 2014 |  |
| Mailing Address 300 Parkside Avenue   |                                   | <b>Transaction ID : SA11AI.8791</b>                      |  |
| City<br>Miller Place  | State<br>NY                       | Zip Code<br>11764  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>Just Kids Learning Center   | Occupation<br>Executive Director  |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Illene Herz</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 20 / 2014 |  |
| Mailing Address 63 Hunting Hill Rd  |                                  | <b>Transaction ID : SA11AI.8911</b>                      |  |
| City<br>Dix Hills   | State<br>NY                      | Zip Code<br>11746  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>Sterling Carpet   | Occupation<br>Owner              |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2500.00 |
| <b>TOTAL</b> 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 20 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 35 37 N.Moore St  
#2A

City State Zip Code  
New York NY 10013

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

Name of Employer Occupation  
New Vernon Capital Investment Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : SA11AI.9042**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Randall Hough**

Mailing Address 1826 Garvey Ave  
#5

City State Zip Code  
Alhambra CA 91803

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : SA11AI.9044**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Vincent Iannelli**

Mailing Address 8-E Donellan Dr

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Iannelli CMST General Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 05 / 2014

**Transaction ID : SA11AI.8913**

Amount of Each Receipt this Period  
500.00

**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 21 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Isernia ESQ**

Mailing Address 93 Patchogue-Holbrook Rd

City Lake Ronkonkoma State NY Zip Code 11779

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

Name of Employer UL LLC Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.9070**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Johnson**

Mailing Address P.O. Box 654

City Middletown State NY Zip Code 10940

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

Name of Employer Self Employed Occupation School Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : SA11AI.9046**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Paul Johnston**

Mailing Address 354 Glenmore Lane

City Bayport State NY Zip Code 11705

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

Name of Employer Precision Transportation Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8896**

Amount of Each Receipt this Period  
 14.00

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

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

764.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Tracy Jones**

Mailing Address 7357 Trails End

City Jacksonville State FL Zip Code 32277

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

Name of Employer Sunstate Beauty Academy Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11AI.8849**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Elaine Kahl**

Mailing Address 157 Warfield Way

City Southampton State NY Zip Code 11968

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : SA11AI.9066**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Ibrahim Kurtulus**

Mailing Address 425 Jefferson Ave

City Staten Island State NY Zip Code 10306

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

Name of Employer Meyers Associates Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : SA11AI.8724**

Amount of Each Receipt this Period  
1250.00

**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 23 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John La Mura**

Mailing Address 38 Nugent Street

City Southampton State NY Zip Code 11968

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8820**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Pouya Lavian**

Mailing Address 301 East 45th Street Apt 15D

City New York State NY Zip Code 10017

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

Name of Employer J.P. Morgan Occupation Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8730**

Amount of Each Receipt this Period  
**600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Pouya Lavian**

Mailing Address 301 East 45th Street Apt 15D

City New York State NY Zip Code 10017

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

Name of Employer J.P. Morgan Occupation Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.9532**

Amount of Each Receipt this Period  
**400.00**

**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 25 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 108 Lynn Ave

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Shinnecock Hardware Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 18 / 2014

**Transaction ID : SA11AI.8793**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Maloney**

Mailing Address 108 Lynn Ave

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Shinnecock Hardware Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2014

**Transaction ID : SA11AI.9016**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Maloney**

Mailing Address 108 Lynn Ave

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Shinnecock Hardware Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2014

**Transaction ID : SA11AI.9531**

Amount of Each Receipt this Period  
900.00

**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 26 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A. Miller & Caggiano LLP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3400 Veterans Memorial Hwy  
 Suite 4  
 City Bohemia State NY Zip Code 11716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : SA11AI.9067**  
 Amount of Each Receipt this Period  
 1000.00

**B. Greg Caggiano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3400 Veterans Memorial Hwy  
 Ste 4  
 City Bohemia State NY Zip Code 11716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Miller & Caggiano LLP Owner  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : SA11AI.9067.0**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**

**C. Miller & Caggiano LLP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3400 Veterans Memorial Hwy  
 Suite 4  
 City Bohemia State NY Zip Code 11716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014  
**Transaction ID : SA11AI.9069**  
 Amount of Each Receipt this Period  
 1000.00

**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 27 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Todd Miller**

Mailing Address 3400 Veterans Memorial Hwy  
Ste 4

City Bohemia State NY Zip Code 11716

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

Name of Employer Miller & Caggiano LLP Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.9069.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Arthur Monaco**

Mailing Address 33 Lourae Dr.

City Massapequa State NY Zip Code 11762

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

Name of Employer Requested Info (Sent letter) Occupation Requested Information

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8824**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Shahid Nawaz**

Mailing Address 6 Elbridge Ct.

City S. Setauket State NY Zip Code 11720-4621

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

Name of Employer N.S.H.O.A. Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8915**

Amount of Each Receipt this Period  
500.00

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 28 OF 61  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 16 Rocco Dr.

City East Northport State NY Zip Code 11731

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

Name of Employer Damianos Realty Group Occupation CFO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : SA11AI.9258**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 10.00

**B.** Full Name (Last, First, Middle Initial)  
**Demet Ozbay**

Mailing Address 2 Daremy Circle

City Medford State NY Zip Code 11763

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

Name of Employer Info Requested---Letter Sent Occupation Info Requested---Letter Sent

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : SA11AI.8993**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Walter Poggi**

Mailing Address 38 Chivalry Lane

City Nesconset State NY Zip Code 11767

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

Name of Employer Retlif Testing Laboratories Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : SA11AI.8945**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

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

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

\_\_\_\_\_ 460.00

\_\_\_\_\_

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 29 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 3 Chestnut Drive

City State Zip Code  
Great Neck NY 11021

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

Name of Employer Occupation  
Info letter sent-Requested Info letter sent-Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : SA11AI.9152**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Peter Rosenthal**

Mailing Address 23 Percheron Lane

City State Zip Code  
Roslyn Heights NY 11577

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

Name of Employer Occupation  
U.B.S Senior Portfolio

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 19 / 2014

**Transaction ID : SA11AI.8804**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Savin Sahin**

Mailing Address 1605 Lad Ave

City State Zip Code  
Medford NY 11763

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

Name of Employer Occupation  
Sahin Auto Care Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 18 / 2014

**Transaction ID : SA11AI.8780**

Amount of Each Receipt this Period  
1750.00

**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 30 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jessica Salamone</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 06 / 2014 |
| Mailing Address 160 Hillcrest Rd  |                                  | <b>Transaction ID : SA11AI.8845</b>                      |
| City<br>Mount Vernon  | State<br>NY                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00             |
| Name of Employer<br>Westchester School of Beauty  | Occupation<br>Owner              |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Frederick Schlomann</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 13 / 2014 |
| Mailing Address 237 Old Willets Path  |                                   | <b>Transaction ID : SA11AI.8923</b>                      |
| City<br>Smithtown   | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>20.00              |
| Name of Employer<br>Retired   | Occupation<br>Retired             |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1007.04 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Susan Schlomann</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 17 / 2014 |
| Mailing Address 237 Old Willets Path  |                                   | <b>Transaction ID : SA11AI.8889</b>                      |
| City<br>Smithtown   | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>25.00              |
| Name of Employer<br>Unemployed  | Occupation<br>Unemployed          |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1062.05 |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 295.00 |
| <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 31 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Susan Schlomann</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 20 / 2014 |
| Mailing Address 237 Old Willets Path  |                                   | <b>Transaction ID : SA11AI.8863</b>                      |
| City<br>Smithtown   | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>10.00              |
| Name of Employer<br>Unemployed  | Occupation<br>Unemployed          |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1072.05 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Merrill Schwartz</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 17 / 2014 |
| Mailing Address 18444 Via Di Regina   |                                   | <b>Transaction ID : SA11AI.8897</b>                      |
| City<br>Boca Raton  | State<br>FL                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>14.00              |
| Name of Employer<br>Retired   | Occupation<br>Retired             |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1454.00 |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Barbara Shumway</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 08 / 2014 |
| Mailing Address 633 W Bloomfield Rd   |   | <b>Transaction ID : SA11AI.8830</b>                      |
| City<br>Pittsford   | State<br>NY                               |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>250.00             |
| Name of Employer<br>Info Requested--Letter Sent   | Occupation<br>Info Requested--Letter Sent |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00          |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 274.00 |
| <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:<br>(check only one)   | PAGE 32 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harold Siegel**

Mailing Address 303 East 57th Street

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Excelsior Graphics Inc President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 14 / 2014

**Transaction ID : SA11AI.8735**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Martin Silverstein**

Mailing Address 70 Wilmington Dr

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation  
N.S.H.O.A. Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 14 / 2014

**Transaction ID : SA11AI.8916**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 7601 Glackens Drive

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Command Post Technologies, INC Defense Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 18 / 2014

**Transaction ID : SA11AI.8966**

Amount of Each Receipt this Period  
140.00

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

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

1340.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 33 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gurmohan Syali**

Mailing Address 129 Breely Blvd

City Melville State NY Zip Code 11747

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11AI.8891**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan Trichter**

Mailing Address 225 W 12th St Apt 5C

City New York State NY Zip Code 10011

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

Name of Employer The Maeva Group Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : SA11AI.9007**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 120 Crystal Beach Blvd

City Moriches State NY Zip Code 11955

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

Name of Employer Self Employed - Sent Letter Occupation Self Employed - Sent Letter

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11AI.8709**

Amount of Each Receipt this Period  
1000.00

**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 34 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Maureen Troy</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 22 / 2014 |  |
| Mailing Address 123 Godfrey Lane  |  | <b>Transaction ID : SA11AI.9053</b>                      |  |
| City<br>Huntington  | State<br>NY                                | Zip Code<br>11743  |  |
| FEC ID number of contributing federal political committee.  |  | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>Sent Letter---Info Requested  | Occupation<br>Sent Letter---Info Requested |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00          |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Maureen Troy</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 22 / 2014 |  |
| Mailing Address 123 Godfrey Lane  |  | <b>Transaction ID : SA11AI.9055</b>                      |  |
| City<br>Huntington  | State<br>NY                                | Zip Code<br>11743  |  |
| FEC ID number of contributing federal political committee.  |  | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>Sent Letter---Info Requested  | Occupation<br>Sent Letter---Info Requested |  |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00          |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Robert Troy</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 22 / 2014 |  |
| Mailing Address 123 Godfrey Lane  |  | <b>Transaction ID : SA11AI.9050</b>                      |  |
| City<br>Huntington  | State<br>NY                                | Zip Code<br>11743  |  |
| FEC ID number of contributing federal political committee.  |  | Amount of Each Receipt this Period<br>2600.00            |  |
| Name of Employer<br>Sent Letter---Info Requested  | Occupation<br>Sent Letter---Info Requested |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00          |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 7800.00 |
| <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 35 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Troy**

Mailing Address 123 Godfrey Lane

City State Zip Code  
Huntington NY 11743

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

Name of Employer Occupation  
Sent Letter---Info Requested Sent Letter---Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2014

**Transaction ID : SA11AI.9052**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 ROUTE 22 EAST

City State Zip Code  
BRIDGEWATER NJ 08807

FEC ID number of contributing federal political committee. **C** C00487181

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : SA11AI.9520**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Victor Van Damme**

Mailing Address 5113 Patricia Ave

City State Zip Code  
Las Vegas NV 89130

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : SA11AI.9454**

Amount of Each Receipt this Period  
100.00

**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: (check only one)  | PAGE 36 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paulette Varol**

Mailing Address 126 Island Estates Pkwy

City State Zip Code  
Palm Coast FL 32137

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

Name of Employer Occupation  
International Beauty Academy Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : SA11AI.8839**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Vigiano**

Mailing Address 12 Jacobsen Court

City State Zip Code  
Medford NY 11763

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2014

**Transaction ID : SA11AI.9032**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Dan Washburn**

Mailing Address 17138 Picketts Cove Rd

City State Zip Code  
Orlando FL 32820

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

Name of Employer Occupation  
Great Clips Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : SA11AI.8837**

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 37 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Westchester School of Beauty Culture Inc**

Mailing Address 6 Gramatan Ave  
Suite 200

City State Zip Code  
Mount Vernon NY 10550

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : SA11AI.8832**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Whelan**

Mailing Address 165 West End Ave Apt 20D

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Blank Rome LLP Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.9153**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeffrey Wiesenfeld**

Mailing Address 80 Beach Road

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Bernstein Global Wealth Mgmt Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11AI.8999**

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 38 OF 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harry Wilson**

Mailing Address 42 Sage Terrace

City Scarsdale State NY Zip Code 10583

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

Name of Employer: Maeva Group LLC Occupation: Turnaround Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : SA11AI.9056**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Wendy Yang**

Mailing Address 15 Rockwood Rd E

City Manhasset State NY Zip Code 11030

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

Name of Employer: Info Requested--Letter Sent Occupation: Info Requested--Letter Sent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : SA11AI.8851**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Carol Zeldin**

Mailing Address PO Box 1128

City Bellmore State NY Zip Code 11710

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

Name of Employer: None Occupation: None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : SA11AI.9157**

Amount of Each Receipt this Period  
2600.00

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

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

5450.00

**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 61 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address **PO Box 1128**

City **Bellmore** State **NY** Zip Code **11710**

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

Name of Employer **Investicorp Inc** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : SA11AI.9158**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Alain Zilkha**

Mailing Address **6 Farmer's Lane**

City **St. James** State **NY** Zip Code **11780**

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

Name of Employer **Zilkha Radiology** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2014**

**Transaction ID : SA11AI.8920**

Amount of Each Receipt this Period  
**100.00**

**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).....

**2700.00**

**74435.00**

**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 40 OF 61 |
|   | <input type="checkbox"/> 11a<br>12 <input checked="" type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A. BUSINESS-INDUSTRY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 888 16TH STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00001727**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11B.8749**

Amount of Each Receipt this Period  
 1000.00

**B. FRIENDS OF JOHN BOEHNER**

Full Name (Last, First, Middle Initial)  
Mailing Address 7908 CINCINNATI DAYTON ROAD SUITE I

City WEST CHESTER State OH Zip Code 45069

FEC ID number of contributing federal political committee. **C C00237198**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11B.8776**

Amount of Each Receipt this Period  
 2000.00

**C. GOP GENERATION Y FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 9055

City PEORIA State IL Zip Code 61612

FEC ID number of contributing federal political committee. **C C00448191**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : SA11B.8742**

Amount of Each Receipt this Period  
 5000.00

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

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

8000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 41 OF 61 |
|   | <input type="checkbox"/> 11a<br>12 <input checked="" type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**New York Republican State Committee**

Mailing Address 315 State Street

City Albany State NY Zip Code 12210

FEC ID number of contributing federal political committee. **C** C00055582

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8956.80

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11B.8775**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**RENEW AMERICA PAC**

Mailing Address 27 LEHIGH COURT

City ROCKVILLE CENTRE State NY Zip Code 11570

FEC ID number of contributing federal political committee. **C** C00290098

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : SA11B.8768**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Suffolk County Conservative Chairmans Club**

Mailing Address P.O. Box 379

City East Islip State NY Zip Code 11730

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : SA11B.8772**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 42 OF 61  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Suffolk County Rest & Tavern Assos. PAC**

Mailing Address PO Box 2507

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : SA11B.9031**

Amount of Each Receipt this Period  
2000.00

Monies are from Permissible Funds

**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).....

2000.00

18500.00

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

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

FOR LINE NUMBER: PAGE 43 OF 61  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CABLEVISION SYSTEMS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **1111 STEWART AVENUE**

City **BETHPAGE** State **NY** Zip Code **11714**

FEC ID number of contributing federal political committee. **C C00197863**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : SA11C.8810**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**FREEDOM PROJECT; THE**

Mailing Address **320 1ST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : SA11C.8788**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address **412 FIRST STREET, SE, SUITE 300**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 14 / 2014**

**Transaction ID : SA11C.8740**

Amount of Each Receipt this Period  
**1000.00**

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

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

**7000.00**

**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 61 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NFIB THE VOICE OF FREE ENTERPRISE INC.**

Mailing Address 1201 F STREET  
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C90013509

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : SA11C.8745**

Amount of Each Receipt this Period  
 5000.00

**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).....

5000.00

12000.00

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 45 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. John Alvarez</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 3 Grand Ave<br>Apt#2   |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.9087</b> |
| City<br>Islip  | State<br>NY  |   |
| Zip Code<br>11722  | Purpose of Disbursement<br>Door-to-Door/GOTV   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Erin Amidon</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 19 / 2014                                |
| Mailing Address 7 Meadowgrass Lane   |  | Amount of Each Disbursement this Period<br>2500.00<br><b>Transaction ID : SB17.9098</b> |
| City<br>Southampton  | State<br>NY  |   |
| Zip Code<br>11968  | Purpose of Disbursement<br>Data Consultant   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Erin Amidon</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 24 / 2014                                |
| Mailing Address 7 Meadowgrass Lane   |  | Amount of Each Disbursement this Period<br>2500.00<br><b>Transaction ID : SB17.9104</b> |
| City<br>Southampton  | State<br>NY  |   |
| Zip Code<br>11968  | Purpose of Disbursement<br>Data Consultant   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6500.00 |
| <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 46 OF 61                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Vincent Belfiore</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 26 / 2014                               |
| Mailing Address 137 Hunter Avenue                                     |   | Amount of Each Disbursement this Period<br>774.10<br><b>Transaction ID : SB17.9526</b> |
| City No Babylon   | State NY Zip Code 11703   |  |
| Purpose of Disbursement Database Services                             | Category/Type 001   |  |
| Candidate Name Zeldin For Congress                                    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)       |  |
| State: NY District: 01  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Brabender Cox LLC</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 06 / 2014                                 |
| Mailing Address 1218 Grandview Avenue                                  |   | Amount of Each Disbursement this Period<br>13794.00<br><b>Transaction ID : SB17.9523</b> |
| City Pittsburgh  | State PA Zip Code 15211   |  |
| Purpose of Disbursement Media/TV/Media Consultant                      | Category/Type 004   |  |
| Candidate Name Zeldin For Congress                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)       |  |
| State: NY District: 01   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Brabender Cox LLC</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 12 / 2014                                 |
| Mailing Address 1218 Grandview Avenue                                  |   | Amount of Each Disbursement this Period<br>14207.00<br><b>Transaction ID : SB17.9522</b> |
| City Pittsburgh  | State PA Zip Code 15211   |  |
| Purpose of Disbursement Media/TV/Media Consultant                      | Category/Type 004   |  |
| Candidate Name Zeldin For Congress                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President |  |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)       |  |
| State: NY District: 01   |   |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 28775.10 |
| <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:<br>(check only one)          | PAGE 47 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Brabender Cox LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 17 / 2014                                 |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>17759.00<br><b>Transaction ID : SB17.9094</b> |
| City<br>Pittsburgh   | State<br>PA  |  |
| Zip Code<br>15211  | Purpose of Disbursement<br>Media/TV/Media Consultant   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 26 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>219.90<br><b>Transaction ID : SB17.9109</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Internet and Phone Use for Moriches Office  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 27 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>269.55<br><b>Transaction ID : SB17.9108</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Internet Use for Headquarters   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18248.45 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 48 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 27 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>109.95<br><b>Transaction ID : SB17.9110</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Internet use for the Moriches Office  | Category/<br>Type<br>001   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Campaigns Unlimited</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 13 / 2014                               |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>400.00<br><b>Transaction ID : SB17.9102</b> |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>Ink for printers  | Category/<br>Type<br>001   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Campaigns Unlimited</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 24 / 2014                               |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>800.64<br><b>Transaction ID : SB17.9507</b> |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>Hotel Rooms for Volunteers  | Category/<br>Type<br>007   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1310.59 |
| <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 49 OF 61                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Felicia Chillak</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 60 Washington St   |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.9514</b> |
| City<br>East Setauket  | State<br>NY  |   |
| Zip Code<br>11733  | Purpose of Disbursement<br>Door-to-Door/GOTV   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Vincent Cipolla</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 1976 Fox Glove Circle  |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.9512</b> |
| City<br>Bellport   | State<br>NY  |   |
| Zip Code<br>11713  | Purpose of Disbursement<br>Door-to-Door/GOTV   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Robert Fiore</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                               |
| Mailing Address 320 East 23rd Street 17E   |  | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.9100</b> |
| City<br>New York   | State<br>NY  |  |
| Zip Code<br>10010  | Purpose of Disbursement<br>Volunteer Coordinator   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3500.00 |
| <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:<br>(check only one)          | PAGE 50 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jacob Frank</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 2 Stillwater Rd   |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.9508</b> |
| City Nissequoque  | State NY Zip Code 11780  |   |
| Purpose of Disbursement Database Services   | Category/Type 001  |   |
| Candidate Name Zeldin For Congress  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Global Payments</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                              |
| Mailing Address 10705 Red Run Blvd  |  | Amount of Each Disbursement this Period<br>56.49<br><b>Transaction ID : SB17.9114</b> |
| City Rockville  | State MD Zip Code 20855  |   |
| Purpose of Disbursement Credit Card Fees  | Category/Type 001  |   |
| Candidate Name Zeldin For Congress  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Global Payments</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                              |
| Mailing Address 10705 Red Run Blvd  |  | Amount of Each Disbursement this Period<br>56.49<br><b>Transaction ID : SB17.9486</b> |
| City Rockville  | State MD Zip Code 20855  |   |
| Purpose of Disbursement Credit Card Fees  | Category/Type 001  |   |
| Candidate Name Zeldin For Congress  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1612.98 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 51 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Lighthouse Consulting</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 151 Brompton Road  |   | Amount of Each Disbursement this Period<br>6500.00<br><b>Transaction ID : SB17.9084</b> |
| City Garden City State NY Zip Code 11530                                   | Purpose of Disbursement Campaign Manager Consulting<br>Category/Type 001  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Lighthouse Consulting</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 24 / 2014                                |
| Mailing Address 151 Brompton Road  |   | Amount of Each Disbursement this Period<br>7500.00<br><b>Transaction ID : SB17.9105</b> |
| City Garden City State NY Zip Code 11530                                   | Purpose of Disbursement Campaign Manager Consulting<br>Category/Type 001  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Nancy Marks</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 27 / 2014                                |
| Mailing Address 47 Flintlock Drive                               |   | Amount of Each Disbursement this Period<br>1290.45<br><b>Transaction ID : SB17.9130</b> |
| City Shirley State NY Zip Code 11967                             | Purpose of Disbursement Supplies for and Event<br>Category/Type 001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 15290.45 |
| <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 52 OF 61                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Smith Point Beverages</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 20 / 2014   |
| Mailing Address 160 Margin Dr W  |  | Amount of Each Disbursement this Period<br>259.21  |
| City Shirley   | State NY   | Zip Code 11967   |
| Purpose of Disbursement<br>Primary Night Supplies                          | Category/Type<br>007   | Transaction ID : SB17.9130.1   |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Sams Club</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 24 / 2014   |
| Mailing Address Horseblock Rd                                  |  | Amount of Each Disbursement this Period<br>375.58  |
| City Medford   | State NY   | Zip Code 11763   |
| Purpose of Disbursement<br>Food for Primary Event              | Category/Type<br>007   | Transaction ID : SB17.9130.4   |
| Candidate Name<br><b>Zeldin For Congress</b>                   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   | [MEMO ITEM]  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Sams Club</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 06 / 2014   |
| Mailing Address Horseblock Rd                                  |  | Amount of Each Disbursement this Period<br>208.67  |
| City Medford   | State NY   | Zip Code 11763   |
| Purpose of Disbursement<br>Food for Event                      | Category/Type<br>007   | Transaction ID : SB17.9130.5   |
| Candidate Name<br><b>Zeldin For Congress</b>                   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   | [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 53 OF 61                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Oorbeek Morehouse Strategies, LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 19 / 2014                                |
| Mailing Address 5614 Garnetts Farm Drive   |  | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.9077</b> |
| City<br>Haymarket  | State<br>VA  |   |
| Zip Code<br>20169  | Purpose of Disbursement<br>Fundraising/Consulting  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Oorbeek Morehouse Strategies, LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 19 / 2014                                |
| Mailing Address 5614 Garnetts Farm Drive   |  | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.9078</b> |
| City<br>Haymarket  | State<br>VA  |   |
| Zip Code<br>20169  | Purpose of Disbursement<br>Fundraising/Consulting  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PDQ Print and Mail Services</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 12 / 2014                               |
| Mailing Address P.O Box 245  |  | Amount of Each Disbursement this Period<br>350.00<br><b>Transaction ID : SB17.9079</b> |
| City<br>Bohemia  | State<br>NY  |  |
| Zip Code<br>11716  | Purpose of Disbursement<br>Envelopes   | Category/<br>Type<br>006   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4350.00 |
| <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:<br>(check only one)          | PAGE 54 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 23 / 2014                           |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br>6729.85<br><b>Transaction ID : SB17.9116</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Mailing for Campaign<br>006<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 24 / 2014                           |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br>2650.00<br><b>Transaction ID : SB17.9083</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Palm Cards<br>006<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Piryx Inc</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 24 / 2014                           |
| Mailing Address 144 2nd Street 1st Floor                       |   | Amount of Each Disbursement this Period<br>1675.59<br><b>Transaction ID : SB17.9530</b> |
| City San Francisco State CA Zip Code 94105                     | Purpose of Disbursement Credit Card fees through primary donations<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 11055.44 |
| <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:<br>(check only one)          | PAGE 55 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Poland Spring</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 27 / 2014                              |
| Mailing Address P.O Box 856192                                     |   | Amount of Each Disbursement this Period<br>77.55<br><b>Transaction ID : SB17.9106</b> |
| City<br>Louisville   | State<br>KY   |   |
| Zip Code<br>40285  | Purpose of Disbursement<br>Water for the Office   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          |   |
| State: NY  | District: 01  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Political Network</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 25 / 2014                                |
| Mailing Address PO Box 21383   |   | Amount of Each Disbursement this Period<br>7155.30<br><b>Transaction ID : SB17.9525</b> |
| City<br>Columbus   | State<br>OH   |   |
| Zip Code<br>43221  | Purpose of Disbursement<br>Phone system contract  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014   | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          |   |
| State: NY  | District: 01  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Pronto of Long Island Inc</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                               |
| Mailing Address 128 Pioneer Dr   |   | Amount of Each Disbursement this Period<br>250.00<br><b>Transaction ID : SB17.9515</b> |
| City<br>Bayshore   | State<br>NY   |  |
| Zip Code<br>11706  | Purpose of Disbursement<br>Donation   | Category/<br>Type<br>012   |
| Candidate Name<br><b>Zeldin For Congress</b>                                   | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          |  |
| State: NY  | District: 01  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7482.85 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 56 OF 61                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Pronto of Long Island Inc</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                                |
| Mailing Address 128 Pioneer Dr   |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.9517</b> |
| City Bayshore State NY Zip Code 11706  | Purpose of Disbursement Donation<br>012<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. PSEG Long Island</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 27 / 2014                               |
| Mailing Address P.O. Box 888   |   | Amount of Each Disbursement this Period<br>170.58<br><b>Transaction ID : SB17.9101</b> |
| City Hicksville State NY Zip Code 11802  | Purpose of Disbursement Electric<br>001<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Sunset Harbour</b>  |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                                |
| Mailing Address 90 Colonial Dr   |   | Amount of Each Disbursement this Period<br>2520.00<br><b>Transaction ID : SB17.9143</b> |
| City East Patchogue State NY Zip Code 11772  | Purpose of Disbursement Fundraising Event<br>007<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3690.58 |
| <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:<br>(check only one)          | PAGE 57 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Times Review News Group</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                                |
| Mailing Address 7785 Main Rd P.O. Box 1500                                   |   | Amount of Each Disbursement this Period<br>5963.90<br><b>Transaction ID : SB17.9113</b> |
| City State Zip Code<br>Mattituck NY 11952                                    | Purpose of Disbursement<br>Advertisement for Campaign<br>004<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Times Review News Group</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 16 / 2014                                |
| Mailing Address 7785 Main Rd P.O. Box 1500                                   |   | Amount of Each Disbursement this Period<br>1423.70<br><b>Transaction ID : SB17.9111</b> |
| City State Zip Code<br>Mattituck NY 11952                                    | Purpose of Disbursement<br>Full Page Ad<br>004<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. US Postmaster</b> |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                               |
| Mailing Address 800 Montauk Highway                                |   | Amount of Each Disbursement this Period<br>980.00<br><b>Transaction ID : SB17.9088</b> |
| City State Zip Code<br>Shirley NY 11967                            | Purpose of Disbursement<br>Stamps<br>006<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 8367.60 |
| <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:<br>(check only one)          | PAGE 58 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 05 / 2014                                |
| Mailing Address 20130 Lakeview Center Plaza  |   | Amount of Each Disbursement this Period<br>4737.17<br><b>Transaction ID : SB17.9490</b> |
| City Ashburn State VA Zip Code 20147   | Purpose of Disbursement Postage and Delivery<br>Category/Type 004   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 09 / 2014                              |
| Mailing Address 800 Montauk Highway  |   | Amount of Each Disbursement this Period<br>68.00<br><b>Transaction ID : SB17.9085</b> |
| City Shirley State NY Zip Code 11967   | Purpose of Disbursement Postcard Stamps<br>Category/Type 001  |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. US Postmaster</b>   |   | Date of Disbursement<br>MM / DD / YYYY<br>06 / 09 / 2014                               |
| Mailing Address 800 Montauk Highway  |   | Amount of Each Disbursement this Period<br>980.00<br><b>Transaction ID : SB17.9086</b> |
| City Shirley State NY Zip Code 11967   | Purpose of Disbursement Stamps<br>Category/Type 006   |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5785.17 |
| <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:<br>(check only one)          | PAGE 59 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 10 / 2014                               |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>980.00<br><b>Transaction ID : SB17.9093</b> |
| City<br>Shirley  | State<br>NY  |  |
| Purpose of Disbursement<br>Stamps  |  | Category/<br>Type<br>006   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 12 / 2014                                |
| Mailing Address 20130 Lakeview Center Plaza  |  | Amount of Each Disbursement this Period<br>4856.78<br><b>Transaction ID : SB17.9492</b> |
| City<br>Ashburn  | State<br>VA  |   |
| Purpose of Disbursement<br>Postage and Delivery  |  | Category/<br>Type<br>004  |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 13 / 2014                               |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>980.00<br><b>Transaction ID : SB17.9080</b> |
| City<br>Shirley  | State<br>NY  |  |
| Purpose of Disbursement<br>Stamps  |  | Category/<br>Type<br>006   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6816.78 |
| <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:<br>(check only one)          | PAGE 60 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 18 / 2014                               |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>735.00<br><b>Transaction ID : SB17.9091</b> |
| City Shirley   | State NY Zip Code 11967  |  |
| Purpose of Disbursement<br>Stamps  | Category/Type<br>006   |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 18 / 2014                               |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>340.00<br><b>Transaction ID : SB17.9092</b> |
| City Shirley   | State NY Zip Code 11967  |  |
| Purpose of Disbursement<br>Postcard Stamps   | Category/Type<br>006   |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. US Postmaster</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 19 / 2014                                |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>1470.00<br><b>Transaction ID : SB17.9095</b> |
| City Shirley   | State NY Zip Code 11967  |   |
| Purpose of Disbursement<br>Stamps  | Category/Type<br>006   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2545.00 |
| <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:<br>(check only one)          | PAGE 61 OF 61                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 20 / 2014                           |
| Mailing Address 800 Montauk Highway  |  | Amount of Each Disbursement this Period<br>1764.00<br><b>Transaction ID : SB17.9097</b> |
| City Shirley   | State NY Zip Code 11967  |   |
| Purpose of Disbursement<br>Stamps  | Category/Type<br>006   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Washington Intelligence Bureau</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 12 / 2014                           |
| Mailing Address 4128 Pepsi Place   |  | Amount of Each Disbursement this Period<br>1334.04<br><b>Transaction ID : SB17.9488</b> |
| City Chantilly   | State VA Zip Code 20151  |   |
| Purpose of Disbursement<br>Caging and Escrow   | Category/Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Washington Intelligence Bureau</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 30 / 2014                         |
| Mailing Address 4128 Pepsi Place   |  | Amount of Each Disbursement this Period<br>72.00<br><b>Transaction ID : SB17.9493</b> |
| City Chantilly   | State VA Zip Code 20151  |   |
| Purpose of Disbursement<br>Postage and Delivery  | Category/Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3170.04   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 128501.03 |