

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

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2014

through

M M / D D / Y Y Y Y
03 / 31 / 2014

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

M M / D D / Y Y Y Y
05 / 13 / 2014

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

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Zeldin For Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	261060.58	603171.86
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	261060.58	603171.86
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	157629.60	192425.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	157629.60	192425.78
8. Cash on Hand at Close of Reporting Period (from Line 27).....	410746.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	186608.28	503655.38
(ii) Unitemized.....	23395.13	41684.31
(iii) TOTAL of contributions from individuals ▶	210003.41	545339.69
(b) Political Party Committees.....	10656.80	11056.80
(c) Other Political Committees (such as PACs).....	40400.37	46775.37
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	261060.58	603171.86
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	261060.58	603171.86

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	157629.60	192425.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	157629.60	192425.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	307315.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	261060.58
25. SUBTOTAL (add Line 23 and Line 24).....	568375.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	157629.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	410746.08

**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 5 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
160 South Ocean LLC

Mailing Address 231 Middle Rd.

City State Zip Code
Blue Point NY 11715

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.6310

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Saul Anuzis

Mailing Address 5 Locust Lane

City State Zip Code
Lansing MI 48911

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

Name of Employer Occupation
Self Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6762

Amount of Each Receipt this Period
500.00

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

Mailing Address 101 Cove Neck Road

City State Zip Code
Oyster Bay NY 11771

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

Name of Employer Occupation
Winthrop Realty Trust CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 14 / 2014

Transaction ID : SA11AI.6023

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 6 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Nicholas M Auletta

Mailing Address 15 Dickinson Avenue

City East Northport State NY Zip Code 11731

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

Name of Employer Summit Security Services, INC Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6467

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Bruce Azus

Mailing Address 9 Bensin Dr

City Melville State NY Zip Code 11747

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

Name of Employer Affiliated Adjustment Group Occupation Insurance Adjuster

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.6845

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Baldassano Architecture

Mailing Address Info Requested

City State Zip Code

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
 02 / 12 / 2014

Transaction ID : SA11AI.6306

Amount of Each Receipt this Period
 250.00

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

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

3350.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Barrett Associates

Mailing Address 95 Columbia Street

City Albany State NY Zip Code 12210

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
 02 / 19 / 2014

Transaction ID : SA11AI.6312

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Rita A Bender

Mailing Address 10 Talisman Drive

City Dix Hills State NY Zip Code 11746

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

Name of Employer Occupation
 Coldwell Banker Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6377

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Howard Bergson

Mailing Address 11 Linda Lane

City Setauket State NY Zip Code 11733

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

Name of Employer Occupation
 Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11AI.6271

Amount of Each Receipt this Period
 250.00

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 8 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Ralph Bisceglia

Mailing Address 361 W. Hills Rd.

City: Huntington State: NY Zip Code: 11743

FEC ID number of contributing federal political committee: C

Name of Employer: American Transit Insurance Co. Occupation: Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 12 / 2014

Transaction ID : SA11AI.6086

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 308 East Meadow Avenue

City: East Meadow State: NY Zip Code: 11554

FEC ID number of contributing federal political committee: C

Name of Employer: RMB Drafting Services Inc Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 01 / 27 / 2014

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
BK Development LLC

Mailing Address c/o EB Const, 401 Franklin Ave Suite 211

City: Garden City State: NY Zip Code: 00530

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: 01 / 27 / 2014

Transaction ID : SA11AI.6320

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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Jason Blasberg

Mailing Address 222 Mount Vernon Ave

City Medford State NY Zip Code 11763

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

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6436

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Bond Schoeneck & King PLLC

Mailing Address 111 Washington Avenue

City Albany State NY Zip Code 12210

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
 01 / 07 / 2014

Transaction ID : SA11AI.6294

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Anthony J Bonomo

Mailing Address 10 Walter Lane

City Manhasset State NY Zip Code 11030

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.6517

Amount of Each Receipt this Period
 2600.00

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

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

3350.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Anthony J Bonomo

Mailing Address 10 Walter Lane

City State Zip Code
Manhasset NY 11030

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
5200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 11 / 2014

Transaction ID : SA11AI.6519

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Alexander Borg

Mailing Address 31 Nathan Hale Dr.

City State Zip Code
Huntington NY 11743

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

Name of Employer Occupation
Borg & Borg, Inc. Account Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 20 / 2014

Transaction ID : SA11AI.6261

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dennis Boyle

Mailing Address 14 Brookes Road

City State Zip Code
No Babylon NY 11703

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
264.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : SA11AI.6055

Amount of Each Receipt this Period
250.00

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 11 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Jack Brach		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2014
Mailing Address 11 Lawrence Lane		Transaction ID : SA11AI.6530
City Lawrence	State NY	Zip Code 11559
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Brach Supermarket	Occupation President/CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Laura A Brito		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2014
Mailing Address 82-17 Penelope Ave		Transaction ID : SA11AI.6887
City Middle Village	State NY	Zip Code 11379
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Pheonix Beverages	Occupation VP	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) Laura A Brito		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 27 / 2014
Mailing Address 82-17 Penelope Ave		Transaction ID : SA11AI.6889
City Middle Village	State NY	Zip Code 11379
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Pheonix Beverages	Occupation VP	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 3 Spinnaker Court

City Northport State NY Zip Code 11768

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

Name of Employer Atlantic Auto Group Occupation Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.6340

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Jacquelyn Brucia

Mailing Address 110 Cooper Street

City Babylon State NY Zip Code 11702

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

Name of Employer Atlantic Auto Mall Occupation Comptroller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6342

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
George Calcanes

Mailing Address 9 Badger Trail

City Coram State NY Zip Code 11727

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

Name of Employer N.S.H.O.A. Occupation Chief Clinical Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6151

Amount of Each Receipt this Period
 250.00

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 13 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Joseph Carrucciu

Mailing Address 600 Moriches Rd.

City St. James State NY Zip Code 11780

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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6207

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Troy A Caruso

Mailing Address 10 Colonial Drive

City Smithtown State NY Zip Code 11787

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.6407

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Mickey Cavuoti

Mailing Address Empire State Building

City New York State NY Zip Code 10118

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

Name of Employer Intellipayment Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.6546

Amount of Each Receipt this Period
 500.00

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

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

1750.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Gasper Celauro

Mailing Address 66 Medford Ave.

City Patchogue State NY Zip Code 11772

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

Name of Employer Bellgrade Realty, Inc. Occupation Commercial Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.6077

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Robert M Cembrook

Mailing Address 115 Windwatch Drive

City Hauppague State NY Zip Code 11788

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

Name of Employer PSL IND INC Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6442

Amount of Each Receipt this Period
 400.00

C. Full Name (Last, First, Middle Initial)
Lawrence Cervellino

Mailing Address 10 Burham Ct

City Smithtown State NY Zip Code 11787

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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.5806

Amount of Each Receipt this Period
 100.00

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 15 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Christopher Chimeri

Mailing Address 888 Vets Memorial Hwy

City: Hauppauge State: NY Zip Code: 11788

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

Name of Employer: Self Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 13 / 2014

Transaction ID : SA11AI.6565

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Dennis Christoforatos

Mailing Address 1212 Washington Street Apt 4S

City: Hoboken State: NJ Zip Code: 07030

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

Name of Employer: DLA Occupation: Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : SA11AI.6663

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Brian Chu

Mailing Address 8 Baron Ct.

City: Stony Brook State: NY Zip Code: 11790

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

Name of Employer: St. Charles Hospital Occupation: Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 24 / 2014

Transaction ID : SA11AI.6156

Amount of Each Receipt this Period: 250.00

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

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

850.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 175 Gnarled Hollow Road

City East Setauket State NY Zip Code 11733

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

Name of Employer NSHOA Occupation Physican

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6155

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph Cirrone

Mailing Address 22 Ledgewood circle

City East Setauket State NY Zip Code 11733-1151

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

Name of Employer N.S.H.O.A. Occupation Radiation Oncologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6201

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Kenneth Coder

Mailing Address 6 North Wisconsin Ave

City Massapequa State NY Zip Code 11758

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.6817

Amount of Each Receipt this Period
500.00

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 17 OF 134	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Jonathan Cogan

Mailing Address 24 Sisson Terrace

City State Zip Code
Tenasly NJ 07670

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

Name of Employer Occupation
Kobre & Kim LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6415

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Sabrina M Coleman

Mailing Address 96 Shore Road

City State Zip Code
Mount Sinai NY 11766

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
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6431

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
COMMUNITY ONCOLOGY ALLIANCE PAC

Mailing Address 1101 Pennsylvania Ave
Suite 700

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00383976

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
03 / 20 / 2014

Transaction ID : SA11AI.6626

Amount of Each Receipt this Period
1000.00

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

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

1550.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) John Corrado		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 09 / 2014
Mailing Address PO Box 5510		Transaction ID : SA11AI.6085
City Bay Shore	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Suffolk Transportation Service	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Catherine A Cudia		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014
Mailing Address 40 Spray Court		Transaction ID : SA11AI.6398
City Bayport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer VSC Electric INC	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) John Cushman		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2014
Mailing Address 107 Truerg Ave.		Transaction ID : SA11AI.6104
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Alfonse D'Amato

Mailing Address 101 Park Avenue

City State Zip Code
New York NY 10178

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

Name of Employer Occupation
Park Strategies LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11AI.6492

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Alfonse D'Amato

Mailing Address 101 Park Avenue

City State Zip Code
New York NY 10178

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

Name of Employer Occupation
Park Strategies LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11AI.6498

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Armand P D'Amato

Mailing Address 25 Count Rumford Lane

City State Zip Code
Lloyd Harbor NY 11743

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

Name of Employer Occupation
Park Strategies LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 20 / 2014

Transaction ID : SA11AI.6490

Amount of Each Receipt this Period
1000.00

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

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

3600.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Noshir Dacosta		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 9 Dorm Ct.		Transaction ID : SA11AI.6221
City Setauket	State NY	
Zip Code 11733		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Michael P Dalessio		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 12 Water St Suite 204		Transaction ID : SA11AI.6813
City White Plains	State NY	
Zip Code 10601		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Real Estate Developer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Christopher P Damato		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 18 Summer Street		Transaction ID : SA11AI.6488
City Forest Hills	State NY	
Zip Code 11375		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
John Damianos

Mailing Address 14 Blueberry Ridge Road

City State Zip Code
Setauket NY 11733

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

Name of Employer Occupation
Bonvi Realty Inc Property Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1376.33

Date of Receipt
 M M / D D / Y Y Y Y
03 / 01 / 2014

Transaction ID : SA11AI.6906

Amount of Each Receipt this Period
1376.33

In-kind - Rent

B. Full Name (Last, First, Middle Initial)
Markella Damianos

Mailing Address One Meadow Gate East

City State Zip Code
Head of the Harbor NY 11780

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

Name of Employer Occupation
None Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1164.80

Date of Receipt
 M M / D D / Y Y Y Y
02 / 01 / 2014

Transaction ID : SA11AI.6909

Amount of Each Receipt this Period
1164.80

In-kind - Feb Rent

C. Full Name (Last, First, Middle Initial)
Markella Damianos

Mailing Address One Meadow Gate East

City State Zip Code
Head of the Harbor NY 11780

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

Name of Employer Occupation
None Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2329.60

Date of Receipt
 M M / D D / Y Y Y Y
03 / 01 / 2014

Transaction ID : SA11AI.6912

Amount of Each Receipt this Period
1164.80

In-kind - March Rent

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

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

3705.93

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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 Datre

Mailing Address 3 Gianna Ct.

City Hauppauge State NY Zip Code 11788

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

Name of Employer CT Custom Builder Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6073

Amount of Each Receipt this Period
 250.00

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

Mailing Address 12 Union Ave

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer STD Spring Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6147

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Anthony Davi

Mailing Address 12 Union Ave

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer STD Spring Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6543

Amount of Each Receipt this Period
 100.00

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

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

650.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Anthony Davi		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 12 Union Ave		Transaction ID : SA11AI.6956
City Ronkonkoma	State NY	
Zip Code 11779		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer STD Spring	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Lee DeLorenzo		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 666 Old Country Road Suite 104		Transaction ID : SA11AI.6129
City Garden City	State NY	
Zip Code 11530		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer United Asset Strategies	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. David T Diamond		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1919 Williamsbridge Rd		Transaction ID : SA11AI.6847
City Bronx	State NY	
Zip Code 10461		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Diamond Property Group	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Rebecca Diamond		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 10 Rising Ridge Rd		Transaction ID : SA11AI.6716
City Upper Saddle River	State NJ	Zip Code 07458
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Self Employed	Occupation Home Maker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Douglas R Donaldson		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2014
Mailing Address 1 Glen Lane		Transaction ID : SA11AI.6379
City Laurel Hollow	State NY	Zip Code 11791
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Donaldson Organization	Occupation Construction	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Scott Donner		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2014
Mailing Address 172-90 Highland Ave		Transaction ID : SA11AI.6849
City Jamaica Estates	State NY	Zip Code 11432
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer ADI Management	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 17 Saltmeadow La.

City Bayport State NY Zip Code 11705-2207

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.6053

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Paul Dunn

Mailing Address 295 Broadway

City Huntington Station State NY Zip Code 11746

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

Name of Employer Mainline Electric Occupation Electrician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6413

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Harriett Eaton

Mailing Address PO Box 7224

City Cape Porpoise State ME Zip Code 04014

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.5704

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 26 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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

Full Name (Last, First, Middle Initial) Glenn Edelson		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 35 East 75		Transaction ID : SA11AI.6773
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Macquarie	Occupation Finance	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Lynda Edwards		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2014
Mailing Address P.O. Box 543		Transaction ID : SA11AI.6704
City Amagansett	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Jonathan Eiseman		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2014
Mailing Address 60 Harlan Drive		Transaction ID : SA11AI.6544
City New Rochelle	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Eiseman Levine	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Steven Eisman		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 1111 Marcus Ave. Suite 107		Transaction ID : SA11AI.6088
City State Zip Code New Hyde Park NY 11042-1034	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Abrams, Fensterman, et al Attorney	Amount of Each Receipt this Period 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Mark Engel		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1 Forest Dr		Transaction ID : SA11AI.6685
City State Zip Code Sands Point NY 11050	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Langson Property Services Corp Real estate	Amount of Each Receipt this Period 750.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) C. Matthew Engel		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 19 Soundview Lane		Transaction ID : SA11AI.6683
City State Zip Code Sands Point NY 11050	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Langsam Property Services Corp Real estate	Amount of Each Receipt this Period 750.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 28 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
ERB Limited Liability Company

Mailing Address **c/o HLA, 21 Banfi Plaza**

City **Farmingdale** State **NY** Zip Code **11735**

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
01 / 06 / 2014

Transaction ID : SA11AI.6298

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Arlette Erenberg

Mailing Address **870 United Nations Plz Apt 33D**

City **New York** State **NY** Zip Code **10017**

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

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6623

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Arlette Erenberg

Mailing Address **870 United Nations Plz Apt 33D**

City **New York** State **NY** Zip Code **10017**

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

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6625

Amount of Each Receipt this Period
 2600.00

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

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

6200.00

**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 29 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Sandra Erickson

Mailing Address 538 City Island Ave

City State Zip Code
Bronx NY 10464

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

Name of Employer Occupation
Self Employed Real estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6792

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Emil Everett

Mailing Address 18 River Rd

City State Zip Code
East Hampton NY 11937

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

Name of Employer Occupation
New Amsterdam LLC Financial Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6727

Amount of Each Receipt this Period
500.00

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

Mailing Address 1425 RXR Plaza East Tower
15th Floor

City State Zip Code
Uniondale NY 11556

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6539

Amount of Each Receipt this Period
500.00

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 30 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Pamela Farino

Mailing Address 30 Summerset Drive

City State Zip Code
Smithtown NY 11787

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

Name of Employer Requested Info Occupation
Domestic Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2014

Transaction ID : SA11AI.6427

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Farkas Management LLC

Mailing Address P.O Box 750443

City State Zip Code
Forest Hills NY 11375

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

Name of Employer Requested Info Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6859

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Glen Faulhaber

Mailing Address 22 4th Ave

City State Zip Code
Rocky Point NY 11776

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

Name of Employer Requested Info Occupation
G Plex 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
01 / 13 / 2014

Transaction ID : SA11AI.6043

Amount of Each Receipt this Period
250.00

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

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

1350.00

**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 31 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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 Fine

Mailing Address P.O Box 229

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6457

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Food Industry PAC NYC

Mailing Address 130 Washington Avenue

City State Zip Code
Albany NY 12210-2219

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
 01 / 02 / 2014

Transaction ID : SA11AI.6296

Amount of Each Receipt this Period
250.00

Permissible Funds

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

Mailing Address 130 Shore Rd.
Suite 124

City State Zip Code
Port Washington NY 11050

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

Name of Employer Occupation
Peter Forman Corp 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
 01 / 21 / 2014

Transaction ID : SA11AI.6283

Amount of Each Receipt this Period
2600.00

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

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

3150.00

**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 32 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Peter Forman		Date of Receipt M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 130 Shore Rd. Suite 124		Transaction ID : SA11AI.6285
City Port Washington	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Peter Forman Corp	Occupation Executive	Amount of Each Receipt this Period 5200.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) Ben Friedland		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1315 Pine Avenue		Transaction ID : SA11AI.7292
City West Islip	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 926.51
Name of Employer Brachs	Occupation Food Retailer	In-kind - For Food
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) Jerry George		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 30 Jackson Ave		Transaction ID : SA11AI.6205
City Elmont	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N.S.H.O.A.	Occupation Physician	Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	3776.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Edna M Gerrard		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014	
Mailing Address 10 Perri Circle		Transaction ID : SA11AI.6336	
City Middle Island	State NY	Zip Code 11953	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Bradley Gerstman		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 15 Melby Lane		Transaction ID : SA11AI.7302	
City Roslyn	State NY	Zip Code 11576	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Gotham Government Relations	Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Stephen Giammarese		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 47 Van Buren Street		Transaction ID : SA11AI.6650	
City Port Jefferson Station	State NY	Zip Code 11776	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer PLG, LLP	Occupation CPA		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 590.00		

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL 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: (check only one)	PAGE 34 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Joseph H Gibbons ESQ

Mailing Address

City State Zip Code

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

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6344

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
John Gil

Mailing Address 63 Amy Dr.

City State Zip Code
Sayville NY 11782

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6935

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
John Golden

Mailing Address 39 Olivers Cove Lane

City State Zip Code
Watermill NY 11976

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

Name of Employer
John Golden Associates Occupation
Investments

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6957

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 35 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Zachary Green

Mailing Address 25 East 83rd Street

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Western Asset Management Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.6628

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
George Greene

Mailing Address P.O. Box 1066

City State Zip Code
Selden NY 11784

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.6051

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kenneth Greene

Mailing Address Left message on phone for info

City State Zip Code

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

Name of Employer Occupation
Left request on phone Left request on phone

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.6049

Amount of Each Receipt this Period
250.00

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

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

850.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Greenfield

Mailing Address 112 Merrick Rd.

City Lynbrook State NY Zip Code 11563

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

Name of Employer NGL Group Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.6083

Amount of Each Receipt this Period
 350.00

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

Mailing Address 5 Estate Dr.

City Port Jefferson Station State NY Zip Code 11776

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6195

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Joseph Guarino

Mailing Address 195 Orchid Drive

City Mastic Beach State NY Zip Code 11951

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

Name of Employer Town of Brookhaven Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6330

Amount of Each Receipt this Period
 300.00

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

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

900.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Steven Hertz

Mailing Address 118-35 Queens Blvd

City State Zip Code
Forest Hills NY 11375

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

Name of Employer Occupation
Rappaport Hertz Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.6689

Amount of Each Receipt this Period
250.00

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

Mailing Address 4 Bayberry Lane

City State Zip Code
Stony Brook NY 11790

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

Name of Employer Occupation
Self Employed Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.6137

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert Holzmacher

Mailing Address 8 Tobi Lane

City State Zip Code
Setauket NY 11733-2014

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

Name of Employer Occupation
JR Holzmacher PE LLC Civil Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : SA11AI.6058

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 38 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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 Horne

Mailing Address 4308 Brandywine St, NW

City Washington State DC Zip Code 20016

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

Name of Employer Self Employed Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6799

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Christopher Innace

Mailing Address 2 Ranch Dr.

City Shirley State NY Zip Code 11967

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

Name of Employer Self Employed Occupation Requested info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6448

Amount of Each Receipt this Period
 750.00

C. Full Name (Last, First, Middle Initial)
Carmine Inserra

Mailing Address 3 Huntington Quadrangle

City Melville State NY Zip Code 11747

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

Name of Employer NAI Long Island Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6801

Amount of Each Receipt this Period
 500.00

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

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

1750.00

**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 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Jack Jaffa		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 147 Prince St		Transaction ID : SA11AI.6844
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Jack Jaffa & Associates	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 360.00	

Full Name (Last, First, Middle Initial) Jack Jaffa		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 147 Prince St		Transaction ID : SA11AI.6819
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Jack Jaffa & Associates	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 660.00	

Full Name (Last, First, Middle Initial) Shudh Jasuja		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 12 Pinedale Rd.		Transaction ID : SA11AI.6102
City Hauppauge	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1160.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Cleveland Johnson Jr

Mailing Address 47 Doral Lane

City Bayshore State NY Zip Code 11706

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6446

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mary J Kalikow

Mailing Address 101 Park Avenue

City New York State NY Zip Code 10178

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.6513

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Mary J Kalikow

Mailing Address 101 Park Avenue

City New York State NY Zip Code 10178

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.6803

Amount of Each Receipt this Period
 2600.00

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

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

6200.00

**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 41 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Peter S Kalikow		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 101 Park Avenue 25th Floor		Transaction ID : SA11AI.6515
City New York	State Zip Code NY 10178	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	Amount of Each Receipt this Period 2600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. Peter S Kalikow		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 101 Park Avenue 25th Floor		Transaction ID : SA11AI.6804
City New York	State Zip Code NY 10178	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	Amount of Each Receipt this Period 5200.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) C. Michael Kelly		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 12 Elm Lane		Transaction ID : SA11AI.6065
City Stony Brook	State Zip Code NY 11790-2118	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00
Name of Employer Kelly Development	Occupation Attorney	Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
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: PAGE 42 OF 134
(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)
Michael Kelly

Mailing Address 12 Elm Lane

City State Zip Code
Stony Brook NY 11790-2118

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

Name of Employer Occupation
Kelly Development Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.7291

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Julie Killian

Mailing Address 42 Forest Ave

City State Zip Code
Rye NY 10580

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.6691

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Kenneth Kneesy

Mailing Address 6 Sansun Lane

City State Zip Code
St. James NY 11780

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

Name of Employer Occupation
Suffolk Plastic Surgeons Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6160

Amount of Each Receipt this Period
500.00

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 43 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Steven Kobre		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 315 East 68th Street		Transaction ID : SA11AI.6181
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kobre & Kim LLO	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Steven Kristel		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 75 Covos Run		Transaction ID : SA11AI.6081
City Syosset	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bo's	Occupation Restaurant Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) John La Mura		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 38 Nugent Street		Transaction ID : SA11AI.6334
City Southampton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Pouya Lavian		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 301 East 45th Street Apt 15D		Transaction ID : SA11AI.6750
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer J.P. Morgan	Occupation Financial Services	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Enrico Lazio		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 126 South Windsor Ave.		Transaction ID : SA11AI.6880
City Brightwaters	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Jones Walker	Occupation Partner/Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Charles Lefkowitz		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address PO Box 398		Transaction ID : SA11AI.6352
City Port Jefferson	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Self Employed	Occupation Real Estate	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Lisa Ann Lefkowitz

Mailing Address 35 View Road

City State Zip Code
Setauket NY 11733

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
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11AI.6338

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mark D Legaspi

Mailing Address 18 Jesse Way

City State Zip Code
Mount Sinai NY 11766

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

Name of Employer Occupation
Legaspi Associates INC Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11AI.6391

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
William Lehmann

Mailing Address 19 Boylan Lane

City State Zip Code
Blue Point NY 11715-2302

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

Name of Employer Occupation
Blair Industries Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.6060

Amount of Each Receipt this Period
500.00

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 46 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Wayne Lehrhaupt

Mailing Address 1025 Fifth Avenue
Apt 12FN

City New York State NY Zip Code 10028

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

Name of Employer Eisman Levine et al Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.6229

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Gordon A Lenz

Mailing Address 180 East Main St

City Patchogue State NY Zip Code 11772

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

Name of Employer Conference Associates Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.6872

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Steven Leon

Mailing Address 8 Club Road

City Belle Terre State NY Zip Code 11777

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6203

Amount of Each Receipt this Period
 250.00

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

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

1550.00

**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 47 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Michelle Leshinsky

Mailing Address 1122 East 28th St.

City State Zip Code
Brooklyn NY 11210

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

Name of Employer Occupation
Housing Bridge C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 07 / 2014

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period
1000.00

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

Mailing Address 629 Pine Lane

City State Zip Code
E. Meadow NY 11554

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

Name of Employer Occupation
N.S.H.O.A. CFO-Practice Admin

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 02 / 2014

Transaction ID : SA11AI.6191

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Eric Levine

Mailing Address 16 Random Farms Circle

City State Zip Code
Chappaqua NY 10514

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

Name of Employer Occupation
Eiseman Levine et al Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.6227

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 48 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Elizabeth Levy		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014	
Mailing Address 200 East 65th Street		Transaction ID : SA11AI.6521	
City New York	State NY	Zip Code 10065	Amount of Each Receipt this Period _____ 1600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 1600.00	
Name of Employer Grammies World of Toys	Occupation Marketing		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) Elizabeth Levy		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014	
Mailing Address 200 East 65th Street		Transaction ID : SA11AI.6522	
City New York	State NY	Zip Code 10065	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 1000.00	
Name of Employer Grammies World of Toys	Occupation Marketing		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3600.00		

Full Name (Last, First, Middle Initial) N Brian Lewis		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address 138-18 28th Rd Apt 3B		Transaction ID : SA11AI.6815	
City Flushing	State NY	Zip Code 11354	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 500.00	
Name of Employer Langsam	Occupation Realtor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Jaime Liedtke		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 981 Sunrise Highway		Transaction ID : SA11AI.6409
City West Babylon	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Liedtke Management	Occupation McDonalds	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. William LiPera		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 695 Short Beach Road		Transaction ID : SA11AI.6199
City Nissequogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N.S.H.O.A.	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Pablo Lucas		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 32 Greenview Ct.		Transaction ID : SA11AI.6056
City Bayport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Danic Concrete Corp	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Lynn & Peter LLC

Mailing Address 140 Greene Ave

City Sayville State NY Zip Code 11782

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
 02 / 05 / 2014

Transaction ID : SA11AI.6308

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mark C Lyon

Mailing Address 204 William Street

City Port Jefferson State NY Zip Code 11777

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

Name of Employer Occupation
 Jefferson Consultants President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6350

Amount of Each Receipt this Period
 500.00

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

Mailing Address 349 Smith Rd.

City Shirley State NY Zip Code 11967-2227

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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.6075

Amount of Each Receipt this Period
 250.00

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

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

1750.00

**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 51 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) David Mack		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 2115 Linwood Avenue		Transaction ID : SA11AI.6526	
City State Zip Code Fort Lee NJ 07024	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Mack Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) David Mack		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 2115 Linwood Avenue		Transaction ID : SA11AI.6527	
City State Zip Code Fort Lee NJ 07024	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Mack Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) Sondra Mack		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 2115 Linwood Avenue Suite 110		Transaction ID : SA11AI.6493	
City State Zip Code Fort Lee NJ 07024	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Info letter sent-Requested Info letter sent-Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL 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: (check only one)	PAGE 52 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Sondra Mack

Mailing Address 2115 Linwood Avenue
Suite 110

City State Zip Code
Fort Lee NJ 07024

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
5200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6495

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mahon Mahon Kerins & O'Brien LLC

Mailing Address 254 Nassau Blvd.

City State Zip Code
Garden City South NY 11530

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 05 / 2014

Transaction ID : SA11AI.6322

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Peter V Mandi

Mailing Address 630 Johnson Ave
Suite GL8

City State Zip Code
Bohemia NY 11716

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6444

Amount of Each Receipt this Period
300.00

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

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

3400.00

**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 53 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Anita Manghisi

Mailing Address **24 Railroad Avenue**

City **Patchogue** State **NY** Zip Code **11772**

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

Name of Employer **Independent Recovery Resources** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6440

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Kevin Marcus

Mailing Address **46 Orchard Hill Rd**

City **Katonah** State **NY** Zip Code **10536**

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

Name of Employer **lpreo** Occupation **Financial Technology**

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
03 / 31 / 2014

Transaction ID : SA11AI.6753

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kenneth Mark

Mailing Address **P.O Box 175**

City **Water Mill Rd** State **NY** Zip Code **11976**

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

Name of Employer **Self Employed** Occupation **Physician**

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
03 / 31 / 2014

Transaction ID : SA11AI.6751

Amount of Each Receipt this Period
2000.00

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

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

2550.00

**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 54 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Nancy Marks

Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

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

Name of Employer Campaigns Unlimited Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.83

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6904

Amount of Each Receipt this Period
275.83

In-kind - Decorations for Event

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

Mailing Address 47 Flintlock Drive

City Shirley State NY Zip Code 11967

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
515.01

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.6901

Amount of Each Receipt this Period
515.01

In-kind - Banners

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

Mailing Address 9 Albertson lane

City Old Westbury State NY Zip Code 11568

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6853

Amount of Each Receipt this Period
250.00

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

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

1040.84

**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 55 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Helen Matuz		Date of Receipt M M / D D / Y Y Y Y 03 / 08 / 2014	
Mailing Address 17 Gaymor Lane		Transaction ID : SA11AI.6418	
City Commack	State NY	Zip Code 11725	Amount of Each Receipt this Period _____ 450.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 450.00		

Full Name (Last, First, Middle Initial) B. Robert McBride		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 19 Sleepy Hollow Lane		Transaction ID : SA11AI.6896	
City Dix Hills	State NY	Zip Code 11746	Amount of Each Receipt this Period _____ 2600.00 In-kind -
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Park Strategies	Occupation Partner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) C. Robert McBride		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 19 Sleepy Hollow Lane		Transaction ID : SA11AI.6899	
City Dix Hills	State NY	Zip Code 11746	Amount of Each Receipt this Period _____ 1175.00 In-kind -
FEC ID number of contributing federal political committee.		C _____	
Name of Employer Park Strategies	Occupation Partner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3775.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 4225.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Nancy H McCaffrey

Mailing Address P.O Box 189

City State Zip Code
Wainscott NY 11975

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
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2014

Transaction ID : SA11AI.6536

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Tim McCarthy

Mailing Address 3 East Equine Lane

City State Zip Code
Lake Grove NY 11755

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

Name of Employer Occupation
McCarthy Pub 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
02 / 12 / 2014

Transaction ID : SA11AI.6047

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Lawrence McDonnell

Mailing Address 15 Beaver Brook Dr.

City State Zip Code
Brookhaven NY 11799

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

Name of Employer Occupation
South Fork Funding Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6420

Amount of Each Receipt this Period
1600.00

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

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

2350.00

**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 57 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Lawrence McDonnell

Mailing Address 15 Beaver Brook Dr.

City State Zip Code
Brookhaven NY 11799

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

Name of Employer Occupation
South Fork Funding Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6497

Amount of Each Receipt this Period
900.00

B. Full Name (Last, First, Middle Initial)
James McInerney

Mailing Address 60 West 57th Street Apt 3F

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
JP Morgan Chase Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6465

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Cheryl McKissack Daniel

Mailing Address 118 Cox Avenue

City State Zip Code
Armonk NY 10504-1913

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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 12 / 2014

Transaction ID : SA11AI.6170

Amount of Each Receipt this Period
2600.00

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

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

4000.00

**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 58 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Cheryl McKissack Daniel

Mailing Address 118 Cox Avenue

City Armonk State NY Zip Code 10504-1913

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6172

Amount of Each Receipt this Period
1900.00

B. Full Name (Last, First, Middle Initial)
Lucille Mellish

Mailing Address 2241 Wellesley St

City Palo Alto State CA Zip Code 94306

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.5852

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
James Meyers

Mailing Address 170 Lamson Road

City Mayetta State NJ Zip Code 08092

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

Name of Employer Self Employed Occupation Fishing Industry Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.7298

Amount of Each Receipt this Period
2500.00

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

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

4900.00

**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 59 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Gregory C Miglino Jr		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 414 S Country Rd		Transaction ID : SA11AI.6874
City Brookhaven	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer So Country Ambulance	Occupation Paramedic	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Edward Mikkin		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 10 Tinker Bluff Ct.		Transaction ID : SA11AI.6179
City East Setauket	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation V.P. Chriseddy's Inc.	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Adriana Milana		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 11 Black Rock Road		Transaction ID : SA11AI.6541
City Muttontown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Anthony Milano

Mailing Address Two River Tr, 503

City New York State NY Zip Code 10282

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

Name of Employer Crown Occupation Architecture

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11AI.6676

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
James J Moore

Mailing Address 10 Debbie Trail

City Hampton Bays State NY Zip Code 11946

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.6878

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1426 stony Brook Rd.

City Stony Brook State NY Zip Code 11790

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.6211

Amount of Each Receipt this Period
250.00

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

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

1450.00

**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 61 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Justin Muzinich

Mailing Address 110 East 71st St

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Muzinich & Co Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.6646

Amount of Each Receipt this Period
1000.00

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

Mailing Address 42 Woodlawn Ave

City State Zip Code
New Rochelle NY 10804

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.6805

Amount of Each Receipt this Period
1000.00

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

Mailing Address 6 Elbridge Ct.

City State Zip Code
S. Setauket NY 11720-4621

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6197

Amount of Each Receipt this Period
250.00

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 62 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Sam NeJame		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 17 Chesterwood Drive		Transaction ID : SA11AI.6486
City Selkirk	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Wilson Elser	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Thomas B Newman		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address P.O Box 383		Transaction ID : SA11AI.6367
City Ronkonkoma	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) Carl P Paladino		Date of Receipt M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 282 Potters Road		Transaction ID : SA11AI.6523
City Buffalo	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Ellicott Development Co.	Occupation Developer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	3400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Anthony F Panza		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2014
Mailing Address 31 Turtle Pond Road		Transaction ID : SA11AI.6328
City Southampton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	Election Cycle-to-Date 1500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) William G Parente		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 30 / 2014
Mailing Address 16 Sawgrass Drive Suite 1		Transaction ID : SA11AI.6400
City Bellport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Info letter sent-Requested	Occupation Info letter sent-Requested	Election Cycle-to-Date 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Brian Pendergast		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2014
Mailing Address 11 Argyle lane		Transaction ID : SA11AI.6433
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Lemer Enviromental Inc.	Occupation Owner	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Marc J Piacenti

Mailing Address 27 Fern Avenue

City East Islip State NY Zip Code 11730

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

Name of Employer Highland Organization Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.6411

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
Donald Pius

Mailing Address 794 Fort Salonga Road

City Northport State NY Zip Code 11768

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

Name of Employer Pius Realty Occupation Owner/Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.6371

Amount of Each Receipt this Period
 300.00

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

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6664

Amount of Each Receipt this Period
 100.00

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

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

1150.00

**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 65 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 275 Oakleigh Avenue

City Baiting Hollow State NY Zip Code 11933

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

Name of Employer Buoy One Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.6365

Amount of Each Receipt this Period
 300.00

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

Mailing Address 118 Horseshoe Rd.

City Mill Neck State NY Zip Code 11765-1004

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.6026

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Anthony Quinn

Mailing Address 4 East High Road

City Port Washington State NY Zip Code 11050

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6404

Amount of Each Receipt this Period
 1000.00

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

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

2300.00

**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 66 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Anthony Quinn

Mailing Address 4 East High Road

City State Zip Code
Port Washington NY 11050

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
1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6406

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John P Quinn

Mailing Address 225 Wireless Blvd
Suite 102

City State Zip Code
Hauppague NY 11788

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

Name of Employer Occupation
Accu Health Group CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.6455

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
R & R Property Management LLC

Mailing Address P.O. Box 502

City State Zip Code
Bohemia NY 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
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 07 / 2014

Transaction ID : SA11AI.6302

Amount of Each Receipt this Period
500.00

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 67 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Donald Rettaliata

Mailing Address 148 S. Fairview Ave.

City Bayport State NY Zip Code 11705-2236

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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6071

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Riverhead Pistol & Rifle Club

Mailing Address P.O. Box 61

City Jamesport State NY Zip Code 11947

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
 02 / 22 / 2014

Transaction ID : SA11AI.6316

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
Romaine For Supervisor

Mailing Address P.O. Box 776

City Yaphank State NY Zip Code 11980

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
 02 / 23 / 2014

Transaction ID : SA11AI.6314

Amount of Each Receipt this Period
 1000.00
 From Permissible Funds

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

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

1550.00

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

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

FOR LINE NUMBER: PAGE 68 OF 134
(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)
Lisa Rose

Mailing Address 22 Old Neck Rd., S.

City State Zip Code
Center Moriches NY 11934

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

Name of Employer Occupation
Clare Rose 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 Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6069

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mark Rose

Mailing Address 100 Rose Executive Blvd.

City State Zip Code
East Yaphank NY 11967

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

Name of Employer Occupation
Clare Owner 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 Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6063

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Sean Rose

Mailing Address 21 Boylan Lane

City State Zip Code
Blue Point NY 11715

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

Name of Employer Occupation
Clare Rose 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 Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period
500.00

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

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

3600.00

**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 69 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Patrick Rosenstiel

Mailing Address 1403 Mckinley St

City Saint Paul State MN Zip Code 55108

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

Name of Employer Ainsley Shea Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6794

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Allen Roth

Mailing Address 255 Raymond St

City Rockville Centre State NY Zip Code 11570

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

Name of Employer RSL Management Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.6641

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
George Santiago

Mailing Address 22 Russell Avenue

City Bethpage State NY Zip Code 11714

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

Name of Employer Briarcliffe College Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.6273

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 70 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Dawn Savarese

Mailing Address 315 avalon Pines Dr.

City Coram State NY Zip Code 11727

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6187

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Matthew Schmelzer

Mailing Address 141 E 72nd Street #7

City New York State NY Zip Code 10021

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

Name of Employer Tryax Realty Mgmt Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6812

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Andy Schwartz

Mailing Address 100 Passaic Ave Suite 300

City Fairfield State NJ Zip Code 07004-3508

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

Name of Employer BSCF Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.6231

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**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 71 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Merrill Schwartz

Mailing Address 18444 Via Di Regina

City State Zip Code
Boca Raton FL 33496

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
1440.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6711

Amount of Each Receipt this Period
100.00

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6225

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Aaron Sirulnick

Mailing Address 3333 New Hyde Park Rd
Suite 411

City State Zip Code
New Hyde Park NY 11042

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

Name of Employer Occupation
Ditmas Management Corp Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.6832

Amount of Each Receipt this Period
1000.00

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

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

1600.00

**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 72 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Joanne Smith		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014	
Mailing Address 3 Fathers Court		Transaction ID : SA11AI.6507	
City Dix Hills	State NY	Zip Code 11746	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Standard Valuation Services	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Joanne Smith		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014	
Mailing Address 3 Fathers Court		Transaction ID : SA11AI.6509	
City Dix Hills	State NY	Zip Code 11746	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Standard Valuation Services	Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) C. Alan Snider		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014	
Mailing Address 800 Central Park Avenue Suite 201		Transaction ID : SA11AI.6421	
City Scarsdale	State NY	Zip Code 10583	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL 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: PAGE 73 OF 134
(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)
Joan Soviero

Mailing Address 24 Gaul Road South

City East Setauket State NY Zip Code 11733

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2014

Transaction ID : SA11AI.6397

Amount of Each Receipt this Period
 300.00

Amount of Each Receipt this Period
 350.00

B. Full Name (Last, First, Middle Initial)
Graham Stephens

Mailing Address 14 Duncan Drive

City Greenwich State CT Zip Code 06831

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

Name of Employer Requested Info Occupation Requested Info
 Cassidy Turley Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6660

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 14 Duncan Dr.

City Greenwich State CT Zip Code 06831

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

Name of Employer Requested Info Occupation Requested Info
 Self Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.6659

Amount of Each Receipt this Period
 100.00

Amount of Each Receipt this Period
 600.00

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

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

900.00

**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 74 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) David Sterling		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 33 Windsor Drive		Transaction ID : SA11AI.7305
City Muttontown	State NY	Zip Code 11753
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Sterling Risk	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Michael Theodorakis		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 19 Shore Oaks Dr.		Transaction ID : SA11AI.6189
City Stony Brook	State NY	Zip Code 11790
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer N.S.H.O.A.	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Martin Truex		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 192 Lanson Road		Transaction ID : SA11AI.7296
City Mayetta	State NJ	Zip Code 08092
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Nascar	Occupation Professional Executive Racing	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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

Full Name (Last, First, Middle Initial) A. Donald J Trump		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 725 5th Ave		Transaction ID : SA11AI.6807	
City New York	State NY	Zip Code 10022	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Trump Organization	Occupation Real Estate Investor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Ultimate Care Assisted Living Management LLC		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 200 13th Avenue Suite 1B		Transaction ID : SA11AI.6292	
City Ronkonkoma	State NY	Zip Code 11779	Amount of Each Receipt this Period _____ 1500.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

Full Name (Last, First, Middle Initial) C. Jeffrey Vacirca		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 23 Valentine Rd.		Transaction ID : SA11AI.6153	
City Shoreham	State NY	Zip Code 11786	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Medical Doctor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3000.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Jose G Vasquez

Mailing Address 1398 Brentwood Road

City Bayshore State NY Zip Code 11706

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

Name of Employer Proficient Consulting Services Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.6453

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Arnold Waldman

Mailing Address 581 Lehigh Lane

City Woodmere State NM Zip Code 11598

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

Name of Employer CBS Coverage Group Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.6864

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Alan Wasserman

Mailing Address 145 Huguenot St

City New Rochelle State NY Zip Code 10801

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

Name of Employer S.W Management LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.6830

Amount of Each Receipt this Period
 750.00

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 77 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Stanley Wasserman

Mailing Address 145 Huguenot St

City State Zip Code
New Rochelle NY 10801

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

Name of Employer Occupation
S.W Management President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.6828

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Kevin Watkins

Mailing Address 24 Stafford Lane

City State Zip Code
Stony Brook NY 11790

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.6209

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Weber Law Group LLP

Mailing Address 290 Broad Hollow Rd.
Suite 200 E

City State Zip Code
Melville NY 11747-4818

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
02 / 12 / 2014

Transaction ID : SA11AI.6304

Amount of Each Receipt this Period
250.00

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

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

1400.00

**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 78 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Jonathan Weinstein

Mailing Address 45 Research Way

City East Setauket State NY Zip Code 11542

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

Name of Employer: Stony Brook Community Medical Occupation: Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.6158

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Colleen P West

Mailing Address 228 Barrett Avenue

City Bayport State NY Zip Code 11705

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

Name of Employer: Self Employed Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11AI.6429

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
John C Whitehead

Mailing Address 666 Fifth Ave

City New York State NY Zip Code 10103

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

Name of Employer: Retired Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.6883

Amount of Each Receipt this Period
 2600.00

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

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

3600.00

**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 79 OF 134
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Stephen Wolinetz

Mailing Address 900 Willis Avenue

City Albertson State NY Zip Code 11507

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

Name of Employer Wolinetz Management LLC Occupation Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2014

Transaction ID : SA11AI.6827

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
David Wolkoff

Mailing Address 1 Executive Drive

City Edgewood State NY Zip Code 11717

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6510

Amount of Each Receipt this Period
2600.00

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

Mailing Address 1 Executive Drive

City Edgewood State NY Zip Code 11717

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.6512

Amount of Each Receipt this Period
2400.00

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

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

5500.00

**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 80 OF 134	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
W R Equipment LLC

Mailing Address 521 Boone Station Dr.
Suite106

City Burlington State NC Zip Code 27215-6077

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
01 / 29 / 2014

Transaction ID : SA11AI.6300

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Robert Youngs

Mailing Address 33 Pine Rd.

City Coram State NY Zip Code 11727

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

Name of Employer Occupation
N.S.H.O.A. Nurse Practioner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.6193

Amount of Each Receipt this Period
250.00

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

Amount of Each Receipt this Period

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

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

1250.00

186608.28

**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 81 OF 134
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Committee To Elect A Republican Majority

Full Name (Last, First, Middle Initial)
Committee To Elect A Republican Majority

Mailing Address P.O Box 7

City Brookhaven State NY Zip Code 11719

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
 03 / 20 / 2014

Transaction ID : SA11B.6558

Amount of Each Receipt this Period
 1000.00

Permissible Funds

B. Islip Town Conservative Exec Committee

Full Name (Last, First, Middle Initial)
Islip Town Conservative Exec Committee

Mailing Address 19 Karp Drive

City Islip Terrace State NY Zip Code 11752

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
 03 / 19 / 2014

Transaction ID : SA11B.6561

Amount of Each Receipt this Period
 1000.00

Permissible Funds

C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Full Name (Last, First, Middle Initial)
Koch Industries Inc Political Action Committee (KochPac)

Mailing Address 600 14TH STREET, NW SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. C C00236489

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
 03 / 28 / 2014

Transaction ID : SA11B.6709

Amount of Each Receipt this Period
 2500.00

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

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

4500.00

**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 82 OF 134
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11B.6615

Amount of Each Receipt this Period
 3956.80

Amount of Each Receipt this Period
 3956.80

B. Full Name (Last, First, Middle Initial)
NEW YORK STATE CONSERVATIVE PARTY

Mailing Address 486 78 STREET

City BROOKLYN State NY Zip Code 11209

FEC ID number of contributing federal political committee. **C** C00282343

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
 03 / 14 / 2014

Transaction ID : SA11B.6598

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Smithtown Republican Victory Fund

Mailing Address 35 Manor Road

City Smithtown State NY Zip Code 11787

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
 03 / 28 / 2014

Transaction ID : SA11B.6893

Amount of Each Receipt this Period
 700.00

Permissible Funds
 1000.00

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

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

5156.80

**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 83 OF 134	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15		

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Suffolk County Correction Officers Association

Mailing Address 1001 Middle Country Road

City Ridge State NY Zip Code 11961

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
03 / 05 / 2014

Transaction ID : SA11B.6590

Amount of Each Receipt this Period
1000.00

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).....

1000.00

10656.80

**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 84 OF 134
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
100 Mariners Way LLC

Mailing Address **16 Hulse Road**

City **East Setauket** State **NY** Zip Code **11733**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 15 / 2014

Transaction ID : SA11C.6582

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Albanian American Public Affairs Committee

Mailing Address **P.O Box 70**

City **Ossining** State **NY** Zip Code **10562**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 22 / 2014

Transaction ID : SA11C.6862

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **2101 L STREET, NW
SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20037**

FEC ID number of contributing federal political committee. **C C00103143**

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 Y Y
02 / 14 / 2014

Transaction ID : SA11C.6600

Amount of Each Receipt this Period
1000.00

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

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

1700.00

**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 85 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN PRINCIPLES

Mailing Address 20533 BISCAYNE BLVD
#250

City State Zip Code
MIAMI FL 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11C.6894

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Bethpage Associates LLC

Mailing Address P.O Box 756

City State Zip Code
Farmingdale NY 11735

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11C.6578

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Carlson Mechanical LLC

Mailing Address P.O Box 5027

City State Zip Code
Rocky Point NY 11778

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11C.6572

Amount of Each Receipt this Period
300.00

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

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

3300.00

**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 86 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Cartier Bernstein Auerbach Dazzo Attorneys & Counselors at Law

Mailing Address 100 Austin Street
Building 2

City Patchogue State NY Zip Code 11772

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
03 / 20 / 2014

Transaction ID : SA11C.6576

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Citizens for Veterans in Government

Mailing Address Po Box 677

City Shirley State NY Zip Code 11967

FEC ID number of contributing federal political committee. **C C00551200**

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
03 / 19 / 2014

Transaction ID : SA11C.6595

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CITIZENS UNITED POLITICAL VICTORY FUND

Mailing Address 1006 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00295527**

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
02 / 27 / 2014

Transaction ID : SA11C.6604

Amount of Each Receipt this Period
5000.00

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

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

5750.00

**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 87 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Final Touch Flooring
 Full Name (Last, First, Middle Initial)
 Mailing Address 59 Remington Blvd
 Suite B
 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

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014
Transaction ID : SA11C.6584
 Amount of Each Receipt this Period
 250.00

B. First Rate Building Services
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Union Ave
 City Holbrook State NY Zip Code 11741
 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
 03 / 18 / 2014
Transaction ID : SA11C.6588
 Amount of Each Receipt this Period
 250.00

C. Friends of Anthony Senft
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Carleton Ave
 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

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014
Transaction ID : SA11C.6978
 Amount of Each Receipt this Period
 1000.00
 Permissible Funds

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 88 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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 Dan Panico

Mailing Address 447 Montauk Highway

City Eastport State NY Zip Code 11941

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
 03 / 14 / 2014

Transaction ID : SA11C.6563

Amount of Each Receipt this Period
 1000.00

Permissible Funds

B. Full Name (Last, First, Middle Initial)
Friends of Tony Palumbo

Mailing Address PO Box 677

City Shirley State NY Zip Code 11967

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
 03 / 31 / 2014

Transaction ID : SA11C.6857

Amount of Each Receipt this Period
 100.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

FEC ID number of contributing federal political committee. **C** C00504522

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
 03 / 27 / 2014

Transaction ID : SA11C.6810

Amount of Each Receipt this Period
 1000.00

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

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

2100.00

**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 89 OF 134
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

A. Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code
WASHINGTON DC 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
2500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11C.6606

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. International Union of Operating Engineers

Mailing Address P.O Box 206

City State Zip Code
Farmingdale NY 11735

FEC ID number of contributing federal political committee. **C** C00247197

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11C.6974

Amount of Each Receipt this Period
4500.00

Full Name (Last, First, Middle Initial)
C. Llobell Realty Property Management Real Estate Services

Mailing Address P.O Box 701

City State Zip Code
Sayville NY 11782

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11C.6569

Amount of Each Receipt this Period
150.00

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

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

7150.00

**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 90 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City BAKERSFIELD State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

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
 02 / 24 / 2014

Transaction ID : SA11C.6602

Amount of Each Receipt this Period
 5000.00

B. Manorville Property Partners LLC

Full Name (Last, First, Middle Initial)
Manorville Property Partners LLC

Mailing Address 167-1 Route 112

City Coram State NY Zip Code 11727

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
 03 / 20 / 2014

Transaction ID : SA11C.6574

Amount of Each Receipt this Period
 1000.00

C. National Translational Research Group LLC

Full Name (Last, First, Middle Initial)
National Translational Research Group LLC

Mailing Address PO Box 155

City Port Jefferson State NY Zip Code 11777

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
 03 / 20 / 2014

Transaction ID : SA11C.6571

Amount of Each Receipt this Period
 1500.00

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

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

7500.00

**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 91 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
OIL FREEDOM NOW PAC

Mailing Address 130 SHORE RD SUITE 124
VIA FORMAN GROUP

City PORT WASHINGTON State NY Zip Code 11050

FEC ID number of contributing federal political committee. **C** C00450585

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.37

Date of Receipt
M M / D D / Y Y Y Y
01 / 22 / 2014

Transaction ID : SA11C.6610

Amount of Each Receipt this Period
2500.37

B. Full Name (Last, First, Middle Initial)
PA PBA PAC

Mailing Address 611 Palisade Avenue

City Englewood Cliffs State NJ Zip Code 07632

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2014

Transaction ID : SA11C.6619

Amount of Each Receipt this Period
500.00

Permissible Funds

C. Full Name (Last, First, Middle Initial)
PETE KING FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1428

City SEAFORD State NY Zip Code 11783

FEC ID number of contributing federal political committee. **C** C00272211

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
02 / 27 / 2014

Transaction ID : SA11C.6596

Amount of Each Receipt this Period
1000.00

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

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

4000.37

**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 92 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Quatela Hargraves Mari

Mailing Address 888 Veterans Memorial Highway
Suite 530

City Hauppague State NY Zip Code 11788

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
 03 / 12 / 2014

Transaction ID : SA11C.6567

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Relations Auto

Mailing Address 1875 Lakeland Ave

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

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11C.6586

Amount of Each Receipt this Period
 250.00

C. 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**

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
 03 / 13 / 2014

Transaction ID : SA11C.6617

Amount of Each Receipt this Period
 2500.00

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

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

3750.00

**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 93 OF 134
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
South Shore Center For Speech Language and Swallowing Disorders LLP

Mailing Address 400 Montauk Highway
Suite 152

City State Zip Code
Babylon NY 11702

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11C.6580

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
THE TRAVELERS COMPANIES INC. PAC

Mailing Address ONE TOWER SQUARE

City State Zip Code
HARTFORD CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

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
 02 / 27 / 2014

Transaction ID : SA11C.6613

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
USAA Employee PAC

Mailing Address 9800 Frederickson Road
Building D3W

City State Zip Code
San Antonio TX 78288

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11C.6936

Amount of Each Receipt this Period
2500.00

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

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

3650.00

40400.37

**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 94 OF 134		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Airport Diner		Date of Disbursement MM / DD / YYYY 03 / 08 / 2014
Mailing Address Vets Memorial Highway		Amount of Each Disbursement this Period 31.00 Transaction ID : SB17.7112
City Ronkonkoma State NY Zip Code 11779	Purpose of Disbursement Lunch	
Candidate Name Zeldin For Congress		Category/Type 001
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) B. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address 433 Amon Carter Blvd		Amount of Each Disbursement this Period 230.00 Transaction ID : SB17.7120
City Fort Worth State TX Zip Code 76155	Purpose of Disbursement Flight	
Candidate Name Zeldin For Congress		Category/Type 002
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) c. AmTrak		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 404.00 Transaction ID : SB17.7097
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Fare	
Candidate Name Zeldin For Congress		Category/Type 002
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		

SUBTOTAL of Disbursements This Page (optional).....	665.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Aristotle International, INC		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 1600.00 Transaction ID : SB17.6988
City Washington State DC Zip Code 20003	Purpose of Disbursement Program 001 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Aristotle International, INC		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 8500.00 Transaction ID : SB17.6989
City Washington State DC Zip Code 20003	Purpose of Disbursement Program 001 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Aristotle International, INC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 1081.72 Transaction ID : SB17.6986
City Washington State DC Zip Code 20003	Purpose of Disbursement Program 001 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	11181.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Vincent Belfiore		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 137 Hunter Avenue		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.7287
City No Babylon	State NY	
Zip Code 11703	Purpose of Disbursement Coordinator	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) B. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.7003
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Consultant	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) c. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.7004
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Video	Category/ Type 006
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	

SUBTOTAL of Disbursements This Page (optional).....	11900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Brabender Cox LLC		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 11500.00 Transaction ID : SB17.7005
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Consultant	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) B. Brabender Cox LLC		Date of Disbursement MM / DD / YYYY 03 / 19 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 2325.00 Transaction ID : SB17.7282
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Radio Ads	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) c. Campaigns Unlimited		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7268
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Accting Retainer	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	

SUBTOTAL of Disbursements This Page (optional).....	14825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.7269
City Shirley	State NY	
Purpose of Disbursement Professional Actcing 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) B. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.7289
City Shirley	State NY	
Purpose of Disbursement Actcing Retainer		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) c. Castle Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 4617.47 Transaction ID : SB17.6980
City Charlotte	State NC	
Purpose of Disbursement Social Media Consultant		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	

SUBTOTAL of Disbursements This Page (optional).....	11617.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Castle Strategies LLC		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.7006
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Social Media Consultants	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) B. Kara Cumoletti		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 4000 Stonegate Dr Apt 4104		Amount of Each Disbursement this Period 665.91 Transaction ID : SB17.7073
City Rensselaer	State NY	
Zip Code 12144	Purpose of Disbursement Expenses	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) c. Straight Talk Wireless		Date of Disbursement MM / DD / YYYY 02 / 01 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 229.98 Transaction ID : SB17.7073.0 [MEMO ITEM]
City Miami	State FL	
Zip Code 33178	Purpose of Disbursement Cell Phone	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	

SUBTOTAL of Disbursements This Page (optional).....	4665.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 321.60
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Plane Ticket	Category/Type 002	Transaction ID : SB17.7073.1 [MEMO ITEM]
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) B. John Damianos		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 14 Blueberry Ridge Road		Amount of Each Disbursement this Period 1376.33
City Setauket	State NY Zip Code 11733	
Purpose of Disbursement In-kind - Rent	Category/Type	Transaction ID : SB17.6908
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) c. Markella Damianos		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address One Meadow Gate East		Amount of Each Disbursement this Period 1164.80
City Head of the Harbor	State NY Zip Code 11780	
Purpose of Disbursement In-kind - Feb Rent	Category/Type	Transaction ID : SB17.6911
Candidate Name	Office Sought: <input 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: District:		

SUBTOTAL of Disbursements This Page (optional).....	2541.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Markella Damianos		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address One Meadow Gate East		Amount of Each Disbursement this Period 1164.80
City Head of the Harbor	State NY Zip Code 11780	
Purpose of Disbursement In-kind - March Rent	Candidate Name	Transaction ID : SB17.6913
Office Sought: <input 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: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address P.O Box 20980 Department 980		Amount of Each Disbursement this Period 264.00
City Atlanta	State GA Zip Code 30320	
Purpose of Disbursement Flight	Candidate Name Zeldin For Congress	Transaction ID : SB17.7100
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	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Eastern American Data		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address P.O Box 8043		Amount of Each Disbursement this Period 647.41
City Long Island City	State NY Zip Code 11101	
Purpose of Disbursement Copier Deposit	Candidate Name Zeldin For Congress	Transaction ID : SB17.7089
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	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	2076.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. East Wind Caterers		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 5720 Route 25A		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6949
City Wading River	State NY	
Purpose of Disbursement Deposit for Event	Category/ Type 003	
Candidate Name Zeldin For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. East Wind Caterers		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 5720 Route 25A		Amount of Each Disbursement this Period 4900.00 Transaction ID : SB17.6999
City Wading River	State NY	
Purpose of Disbursement Event	Category/ Type 003	
Candidate Name Zeldin For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. East Wind Caterers		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 5720 Route 25A		Amount of Each Disbursement this Period 225.00 Transaction ID : SB17.7000
City Wading River	State NY	
Purpose of Disbursement Service Money	Category/ Type 003	
Candidate Name Zeldin For Congress	Disbursement For: 2014	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	5625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Ben Friedland		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1315 Pine Avenue		Amount of Each Disbursement this Period 926.51 Transaction ID : SB17.7294
City West Islip State NY Zip Code 11795	Purpose of Disbursement In-kind - For Food Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Gaylord National		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2014
Mailing Address 201 Waterfront St		Amount of Each Disbursement this Period 469.92 Transaction ID : SB17.7108
City National Harbor State MD Zip Code 20745	Purpose of Disbursement Hotel for Convention Category/Type 002	
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) c. Belinda Groneman		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 648.36 Transaction ID : SB17.6981
City East Islip State NY Zip Code 11730	Purpose of Disbursement Reimbursement-Supplies 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		

SUBTOTAL of Disbursements This Page (optional).....	2044.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Staples Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 526 Route 111		Amount of Each Disbursement this Period 526.52
City Hauppauge	State NY	Zip Code 11788
Purpose of Disbursement Office-HQ Supplies	Category/ Type 001	
Candidate Name Zeldin For Congress		Transaction ID : SB17.6981.1 [MEMO ITEM]
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) B. Harleysville Insurance		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address PO Box 37712		Amount of Each Disbursement this Period 752.11
City Philadelphia	State PA	Zip Code 19101
Purpose of Disbursement HQ Insurance Coverage	Category/ Type 001	
Candidate Name Zeldin For Congress		Transaction ID : SB17.6925
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) c. HSP Direct		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 13755 Sunrise Valley Dr Suite 450		Amount of Each Disbursement this Period 5500.00
City Herndon	State VA	Zip Code 20171
Purpose of Disbursement Direct Mail Fundraising	Category/ Type 003	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7219
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	

SUBTOTAL of Disbursements This Page (optional).....	6252.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Independent Recovery Resources

Full Name (Last, First, Middle Initial)
Mailing Address 24 Railroad Avenue

City Patchogue State NY Zip Code 11772

Purpose of Disbursement Phone Service
Category/Type 001

Candidate Name Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement 02 / 04 / 2014

Amount of Each Disbursement this Period 3500.00
Transaction ID : SB17.7280

B. Iron Cross Productions

Full Name (Last, First, Middle Initial)
Mailing Address 157 Johnstontown Road

City Sloatsburg State NY Zip Code 10974

Purpose of Disbursement Production Expenses
Category/Type 004

Candidate Name Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement 01 / 08 / 2014

Amount of Each Disbursement this Period 500.00
Transaction ID : SB17.6930

c. Iron Cross Productions

Full Name (Last, First, Middle Initial)
Mailing Address 157 Johnstontown Road

City Sloatsburg State NY Zip Code 10974

Purpose of Disbursement Production Expenses
Category/Type 004

Candidate Name Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement 01 / 08 / 2014

Amount of Each Disbursement this Period 1672.50
Transaction ID : SB17.6932

SUBTOTAL of Disbursements This Page (optional) 5672.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Keegan Enterprise		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6922
City Smithtown	State NY	
Zip Code 11787	Purpose of Disbursement Rent	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) B. Keegan Enterprise		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.6924
City Smithtown	State NY	
Zip Code 11787	Purpose of Disbursement Security Deposit	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) c. Lighthouse Consulting		Date of Disbursement MM / DD / YYYY 01 / 04 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 14000.00 Transaction ID : SB17.7270
City Garden City	State NY	
Zip Code 11530	Purpose of Disbursement Consulting	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	

SUBTOTAL of Disbursements This Page (optional).....	15500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Lighthouse Consulting		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 9,999.99 7500.00
City Garden City State NY Zip Code 11530	Purpose of Disbursement Consulting	
Candidate Name Zeldin For Congress Category/Type 001		Transaction ID : SB17.7011
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) B. Lighthouse Consulting		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 9,999.99 1911.78
City Garden City State NY Zip Code 11530	Purpose of Disbursement Reimburse Expenses	
Candidate Name Zeldin For Congress Category/Type 001		Transaction ID : SB17.7013
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) c. Staples Inc		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 526 Route 111		Amount of Each Disbursement this Period 9,999.99 120.68
City Hauppauge State NY Zip Code 11788	Purpose of Disbursement Copies	
Candidate Name Zeldin For Congress Category/Type 006		Transaction ID : SB17.7013.2 [MEMO ITEM]
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		

SUBTOTAL of Disbursements This Page (optional).....	9411.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Staples Inc		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 526 Route 111		Amount of Each Disbursement this Period 166.61
City Hauppauge	State NY	Zip Code 11788
Purpose of Disbursement Rally Supplies	Category/Type 006	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7013.24
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	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. AmTrak		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 99.00
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Train Tickets	Category/Type 002	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7013.25
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	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Holiday Inn		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 205 Wolf Road		Amount of Each Disbursement this Period 276.17
City Albany	State NY	Zip Code 12205
Purpose of Disbursement Hotel	Category/Type 002	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7013.26
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	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Lighthouse Consulting		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.7283
City Garden City State NY Zip Code 11530	Purpose of Disbursement Consulting 001 Category/Type	
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) B. Majority Strategies		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 135 Professional drive Suite 104		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.7007
City Ponte Vedra Beach State FL Zip Code 32082	Purpose of Disbursement Design Work 006 Category/Type	
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) c. Nancy Marks		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 458.29 Transaction ID : SB17.7275
City Shirley State NY Zip Code 11967	Purpose of Disbursement Reimbursement 001 Category/Type	
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		

SUBTOTAL of Disbursements This Page (optional).....	5708.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. 4 Ink Jets		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 3700 Cover Street		Amount of Each Disbursement this Period 458.29
City Long Beach	State CA	
Zip Code 90808	Purpose of Disbursement Copier Ink	Transaction ID : SB17.7275.0 [MEMO ITEM]
Candidate Name Zeldin For Congress	Category/ Type 001	
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) B. Nancy Marks		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 233.00
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Reimbursement	Transaction ID : SB17.7276 [MEMO ITEM]
Candidate Name Zeldin For Congress	Category/ Type 001	
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) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 233.00
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Flight	Transaction ID : SB17.7276.0 [MEMO ITEM]
Candidate Name Zeldin For Congress	Category/ Type 001	
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		

SUBTOTAL of Disbursements This Page (optional).....	233.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Nancy Marks		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 335.09 Transaction ID : SB17.6940
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Reimbursement Supplies	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) B. Staples		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 335.09 Transaction ID : SB17.6940.0 [MEMO ITEM]
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Supplies for Office	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) c. Nancy Marks		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 275.83 Transaction ID : SB17.6905
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement In-kind - Decorations for Event	Category/ Type
Candidate Name	Office Sought: <input 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: District:	

SUBTOTAL of Disbursements This Page (optional).....	610.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Peter Marks		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 515.01 Transaction ID : SB17.6903
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement In-kind - Banners	Category/ Type
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) B. Robert McBride		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 19 Sleepy Hollow Lane		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.6898
City Dix Hills	State NY	
Zip Code 11746	Purpose of Disbursement In-kind -	Category/ Type
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) c. Robert McBride		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 19 Sleepy Hollow Lane		Amount of Each Disbursement this Period 1175.00 Transaction ID : SB17.6900
City Dix Hills	State NY	
Zip Code 11746	Purpose of Disbursement In-kind -	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4290.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Kevin Morello		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 306 Aster Road		Amount of Each Disbursement this Period 95.00 Transaction ID : SB17.7064
City West Islip	State NY	
Zip Code 11795	Purpose of Disbursement Travel Expenses	Category/ Type 002
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) B. Kevin Morello		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 306 Aster Road		Amount of Each Disbursement this Period 1800.00 Transaction ID : SB17.7284
City West Islip	State NY	
Zip Code 11795	Purpose of Disbursement Data	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) c. Nova List		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 13755 Sunrise Valley Dr Suite 450		Amount of Each Disbursement this Period 1430.00 Transaction ID : SB17.7223
City Herndon	State VA	
Zip Code 20171	Purpose of Disbursement List Rental & Maintenance	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	

SUBTOTAL of Disbursements This Page (optional).....	3325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Oorbeek Morehouse Strategies, LLC		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 5614 Garnetts Farm Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6928
City Haymarket State VA Zip Code 20169	Purpose of Disbursement Consulting 001 Category/Type	
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) B. Oorbeek Morehouse Strategies, LLC		Date of Disbursement MM / DD / YYYY 03 / 21 / 2014
Mailing Address 5614 Garnetts Farm Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6998
City Haymarket State VA Zip Code 20169	Purpose of Disbursement Fund Raising Consultant 001 Category/Type	
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) c. PDQ Print and Mail Services		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 5336.99 Transaction ID : SB17.7271
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Invites, Mailing 003 Category/Type	
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		

SUBTOTAL of Disbursements This Page (optional).....	9336.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial)
A. PDQ Print and Mail Services

Mailing Address P.O Box 245

City Bohemia State NY Zip Code 11716

Purpose of Disbursement Mailing

Candidate Name **Zeldin For Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement: 02 / 07 / 2014

Amount of Each Disbursement this Period: 16264.04

Transaction ID : SB17.7009

Category/Type: 006

Full Name (Last, First, Middle Initial)
B. Piryx Inc

Mailing Address 144 2nd Street 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Credit Card Fee

Candidate Name **Zeldin For Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement: 01 / 01 / 2014

Amount of Each Disbursement this Period: 1.62

Transaction ID : SB17.7229

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Piryx Inc

Mailing Address 144 2nd Street 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Credit Card Fee

Candidate Name **Zeldin For Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement: 01 / 02 / 2014

Amount of Each Disbursement this Period: 0.81

Transaction ID : SB17.7230

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 16266.47

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 01 / 07 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7231
Candidate Name Zeldin For Congress	Category/Type 001	
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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 01 / 08 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.88
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7232
Candidate Name Zeldin For Congress	Category/Type 001	
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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 0.29
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7233
Candidate Name Zeldin For Congress	Category/Type 001	
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	

SUBTOTAL of Disbursements This Page (optional).....	60.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7234
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7235
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.7236
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	74.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 299.00 Transaction ID : SB17.7237
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.39 Transaction ID : SB17.7238
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.15 Transaction ID : SB17.7239
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	301.54
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.83
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7240
	001 Category/ Type	
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) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 14.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7241
	001 Category/ Type	
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) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 57.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	Transaction ID : SB17.7242
	001 Category/ Type	
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	

SUBTOTAL of Disbursements This Page (optional)..... 74.71
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 7.90 Transaction ID : SB17.7243
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.96 Transaction ID : SB17.7244
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.62 Transaction ID : SB17.7245
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	11.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.96 Transaction ID : SB17.7246
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 12 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 11.50 Transaction ID : SB17.7247
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7248
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	14.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 61.91 Transaction ID : SB17.7249
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Fee 001 Category/Type	
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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.7250
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Fee 001 Category/Type	
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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 0.81 Transaction ID : SB17.7251
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Fee 001 Category/Type	
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		

SUBTOTAL of Disbursements This Page (optional).....	61.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.77 Transaction ID : SB17.7252
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.10 Transaction ID : SB17.7253
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7254
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	18.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.7255
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 23.29 Transaction ID : SB17.7256
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 3.69 Transaction ID : SB17.7257
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	28.42
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 19.11 Transaction ID : SB17.7258
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 0.81 Transaction ID : SB17.7259
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.62 Transaction ID : SB17.7260
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	21.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement MM / DD / YYYY 03 / 08 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.15 Transaction ID : SB17.7261
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7262
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.7263
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	18.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.7264
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 0.81 Transaction ID : SB17.7265
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) c. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.10 Transaction ID : SB17.7266
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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	

SUBTOTAL of Disbursements This Page (optional).....	4.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Piryx Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.25 Transaction ID : SB17.7267
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Fee	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) B. Political Network		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address PO Box 21383		Amount of Each Disbursement this Period 2652.00 Transaction ID : SB17.6953
City Columbus	State OH	
Zip Code 43221	Purpose of Disbursement Tele Town Hall	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) c. Political Network		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO Box 21383		Amount of Each Disbursement this Period 2652.00 Transaction ID : SB17.6951
City Columbus	State OH	
Zip Code 43221	Purpose of Disbursement Tele Town Hall	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	

SUBTOTAL of Disbursements This Page (optional).....	5306.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 134			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Riverhead Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.6927
City Riverhead	State NY	
Zip Code 11901	Purpose of Disbursement Rent February	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) B. Riverhead Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.6920
City Riverhead	State NY	
Zip Code 11901	Purpose of Disbursement Rent March	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) c. Shirley Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 966.00 Transaction ID : SB17.7274
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Stamps	Category/ Type 003
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	

SUBTOTAL of Disbursements This Page (optional).....	1666.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 134			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Shirley Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 980.00 Transaction ID : SB17.6993
City Shirley State NY Zip Code 11967	Purpose of Disbursement Stamps 001 Category/Type	
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) B. Shirley Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.6990
City Shirley State NY Zip Code 11967	Purpose of Disbursement Overnight Envelope 001 Category/Type	
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) c. Southwest Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 230.00 Transaction ID : SB17.7122
City Dallas State TX Zip Code 75235	Purpose of Disbursement Flight 002 Category/Type	
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		

SUBTOTAL of Disbursements This Page (optional).....	1229.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Staples East Islip		Date of Disbursement MM / DD / YYYY 02 / 22 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 408.95 Transaction ID : SB17.7087
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Office Supplies	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) B. Staples East Islip		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 121.66 Transaction ID : SB17.7113
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Supplies	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) c. Staples Inc		Date of Disbursement MM / DD / YYYY 02 / 22 / 2014
Mailing Address 526 Route 111		Amount of Each Disbursement this Period 189.82 Transaction ID : SB17.7086
City Hauppauge	State NY	
Zip Code 11788	Purpose of Disbursement Office HQ Equipment	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	

SUBTOTAL of Disbursements This Page (optional).....	720.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 109.00 Transaction ID : SB17.7083
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Flight 002 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 134.00 Transaction ID : SB17.7091
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Flight 002 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 144.00 Transaction ID : SB17.7092
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Flight 002 Category/Type	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	387.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. US Airways		Date of Disbursement MM / DD / YYYY 03 / 19 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 313.00 Transaction ID : SB17.7118
City Phoenix	State AZ Zip Code 85034	
Purpose of Disbursement Flight	Category/Type 002	
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) B. Bob Vecchio		Date of Disbursement MM / DD / YYYY 01 / 09 / 2014
Mailing Address		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.7272
City	State Zip Code	
Purpose of Disbursement Music for Rally	Category/Type 007	
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) c. Verizon		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 849.58 Transaction ID : SB17.6996
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cell Phones	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		

SUBTOTAL of Disbursements This Page (optional).....	1412.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 134	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Washington Intelligence Bureau		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 250.00
City Chantilly State VA Zip Code 20151	Purpose of Disbursement Postage & Delivery	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7221
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	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Westin Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2014
Mailing Address 171 Waterfront St		Amount of Each Disbursement this Period 470.56
City National Harbor State MD Zip Code 20745	Purpose of Disbursement Hotel	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7110
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	Category/Type 002	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name		Transaction ID :
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	720.56
TOTAL This Period (last page this line number only).....	155882.77