

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Zeldin For Congress

ADDRESS (number and street)

47 Flintlock Drive

Check if different than previously reported. (ACC)

Shirley

NY

11967

2. FEC IDENTIFICATION NUMBER ▼

C C00552547

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

NY

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Marks

Signature of Treasurer Nancy Marks

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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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))....	131420.32	734592.18
(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)).....	131420.32	734592.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	392556.84	584982.62
(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)).....	392556.84	584982.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	149609.56	
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).....	107716.82	611422.20
(ii) Unitemized.....	21103.50	62737.81
(iii) TOTAL of contributions from individuals ▶	128820.32	674160.01
(b) Political Party Committees.....	0.00	11056.80
(c) Other Political Committees (such as PACs).....	2600.00	49375.37
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	131420.32	734592.18
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)..... ▶	131420.32	734592.18

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	392556.84	584982.62
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) ►	392556.84	584982.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	410746.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	131420.32
25. SUBTOTAL (add Line 23 and Line 24).....	542166.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	392556.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	149609.56

**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 97
	<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)
1 Christopher Realty LLC

Mailing Address **One Christopher Street**

City **New York** State **NY** Zip Code **10014**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7482

Amount of Each Receipt this Period
1000.00
 Single owner LLC

B. Full Name (Last, First, Middle Initial)
Laura Ahearn

Mailing Address **18 Balfour Lane**

City **Stony Brook** State **NY** Zip Code **11790**

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

Name of Employer Occupation
PFML/CVC Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 10 / 2014

Transaction ID : SA11AI.7572

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Farhad Azima

Mailing Address **5921 Ward Parkway**

City **Kansas City** State **MT** Zip Code **64113**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7438

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 97
	<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 Balboni

Mailing Address 50 Meritoria Dr

City East Williston State NY Zip Code 11596

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

Name of Employer S & D Real Estate Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : SA11AI.7408

Amount of Each Receipt this Period
 500.00

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

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : SA11AI.7551

Amount of Each Receipt this Period
 125.00

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

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11AI.7678

Amount of Each Receipt this Period
 14.00

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

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

639.00

**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 97
	<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)
Andrew Balistreri

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **316.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 04 / 2014

Transaction ID : SA11AI.8497

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Ryan Betters

Mailing Address 549 East 11th St Apt# C-2

City New York State NY Zip Code 10009

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

Name of Employer Self Employed Occupation International Business

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11AI.7341

Amount of Each Receipt this Period
1000.00

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

Mailing Address 7 Patricks Way

City St James State NY Zip Code 11780

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

Name of Employer Professional Group Plans Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : SA11AI.7662

Amount of Each Receipt this Period
150.00

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

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

1185.00

**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 97
	<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 Calabrese

Mailing Address 181 Grand St

City State Zip Code
New York NY 10013

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7457

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Joyce Campbell

Mailing Address 125 Broad St

City State Zip Code
New York NY 10004

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.7432

Amount of Each Receipt this Period
1000.00

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

Mailing Address 3075 Veterans Hwy
Suite 201

City State Zip Code
Ronkonkoma NY 11779

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

Name of Employer Occupation
JVC Broadcasting President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2150.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : SA11AI.7447

Amount of Each Receipt this Period
2000.00

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 9 OF 97
	<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)
John Catsimatidis

Mailing Address 817 Fifth Ave

City New York State NY Zip Code 10021

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

Name of Employer Big Apple Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.7384

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Margo Catsimatidis

Mailing Address 817 Fifth Avenue

City New York State NY Zip Code 10021

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.8700

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 817 Fifth Avenue

City New York State NY Zip Code 10021

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

Name of Employer Student Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.7430

Amount of Each Receipt this Period
 500.00

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

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

5700.00

**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 97
	<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)
Lawrence Cervellino

Mailing Address 10 Burham Ct

City State Zip Code
Smithtown NY 11787

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
600.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : SA11AI.7560

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jeremy Chess

Mailing Address P.O. Box 529

City State Zip Code
Yonkers NY 10704

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

Name of Employer Occupation
Jeremy Chess M.D. 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
06 / 02 / 2014

Transaction ID : SA11AI.8608

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Clifford Clark

Mailing Address P.O. Box 614

City State Zip Code
Shelter Island NY 11964

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 31 / 2014

Transaction ID : SA11AI.8105

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 11 OF 97
	<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 Colucci

Mailing Address 7 Bradley Ln.

City East Moriches State NY Zip Code 11940

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 10 / 2014

Transaction ID : SA11AI.7573

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Rex Crandall

Mailing Address 1335 East Anasazi St

City Mesa State AZ Zip Code 85203

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

Name of Employer State of Wyoming Dept of EDU Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.7399

Amount of Each Receipt this Period
500.00

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

Mailing Address 61 Avenue B

City Kings Park State NY Zip Code 11754

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

Name of Employer Town of Smithtown Occupation Councilman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 21 / 2014

Transaction ID : SA11AI.7656

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: PAGE 12 OF 97
(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)
Carlos Curbelo

Mailing Address 8770 Sunset Drive
#355

City Miami State FL Zip Code 33173

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

Name of Employer Capitol Gains Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : SA11AI.7473

Amount of Each Receipt this Period
250.00

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

Mailing Address 399 West John St

City Hicksville State NY Zip Code 11801

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
 05 / 08 / 2014

Transaction ID : SA11AI.7622

Amount of Each Receipt this Period
250.00

Single Owner LLC

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

Mailing Address One Meadow Gate East

City Head of the Harbor State NY Zip Code 11780

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

Name of Employer Student Occupation 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
 06 / 01 / 2014

Transaction ID : SA11AI.8684

Amount of Each Receipt this Period
1164.80

In-kind - June Rent

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

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

1664.80

**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 13 OF 97
	<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)
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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.8678

Amount of Each Receipt this Period
1223.67

In-kind - Rent

B. 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
2752.66

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.9543

Amount of Each Receipt this Period
152.66

In-kind - 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
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.8680

Amount of Each Receipt this Period
270.40

In-kind -HQ Rent

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

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

1646.73

**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 97
	<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)
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
3494.40

Date of Receipt
 M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.9534

Amount of Each Receipt this Period
894.40
 In-kind -HQ 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
4659.20

Date of Receipt
 M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11AI.8682

Amount of Each Receipt this Period
1164.80
 In-kind - HQ Rent

C. Full Name (Last, First, Middle Initial)
DBA Matrix Equities

Mailing Address 1201 Route 112

City State Zip Code
Port Jefferson Station NY 11776

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
05 / 16 / 2014

Transaction ID : SA11AI.7608

Amount of Each Receipt this Period
500.00

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

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

2559.20

**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 97
	<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)
Glen Nelson

Mailing Address 1201Route 112
Did not want to provide home add.

City Port Jeff Sta State NY Zip Code 11776

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

Name of Employer Matrix Equities Occupation 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
05 / 16 / 2014

Transaction ID : SA11AI.7608.0

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Michael Dinapoli

Mailing Address 140 East 56th St
Apt 15C

City New York State NY Zip Code 10022

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

Name of Employer Everpoint Asset Management Occupation Financial Analyst

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
04 / 22 / 2014

Transaction ID : SA11AI.7391

Amount of Each Receipt this Period
250.00

C. 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
310.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2014

Transaction ID : SA11AI.7502

Amount of Each Receipt this Period
60.00

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

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

310.00

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

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

FOR LINE NUMBER: PAGE 16 OF 97
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Alfred Eckert III

Mailing Address 200 East 94th St

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Phoenix Star Capital CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.7455

Amount of Each Receipt this Period
1000.00

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

Mailing Address P.O. Box 543

City State Zip Code
Amagansett NY 11930

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
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11AI.7343

Amount of Each Receipt this Period
100.00

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

Mailing Address P.O. Box 543

City State Zip Code
Amagansett NY 11930

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
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 24 / 2014

Transaction ID : SA11AI.7925

Amount of Each Receipt this Period
200.00

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 17 OF 97
	<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. Stephen Erenberg		Date of Receipt MM / DD / YYYY 05 / 28 / 2014
Mailing Address 36 Ridge St Floor 2		Transaction ID : SA11AI.8051
City Katonah	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Self Employed Sent letter	Occupation Trader	
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. Stephen Erenberg		Date of Receipt MM / DD / YYYY 05 / 28 / 2014
Mailing Address 36 Ridge St Floor 2		Transaction ID : SA11AI.8053
City Katonah	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer Self Employed Sent letter	Occupation Trader	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) C. Megan Foran		Date of Receipt MM / DD / YYYY 04 / 22 / 2014
Mailing Address 449 East 14th St Apt 11C		Transaction ID : SA11AI.7378
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 Self Employed- Sent letter	Occupation Consultant	
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).....	5250.00
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 18 OF 97
	<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) Todd Freund		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1 Brewster Court		Transaction ID : SA11AI.8306
City Setauket	State NY	
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 1500.00	

Full Name (Last, First, Middle Initial) Stephen Giammarese		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 47 Van Buren Street		Transaction ID : SA11AI.8084
City Port Jefferson Station	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
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 650.00	

Full Name (Last, First, Middle Initial) William Goldkind		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 100 Lincoln Ave		Transaction ID : SA11AI.7543
City Holbrook	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Crestwood Metal Corp	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	

SUBTOTAL of Receipts This Page (optional).....	810.00
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 97
	<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. Lawrence Graev		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 767 Third Ave		Transaction ID : SA11AI.7467	
City New York	State NY	Zip Code 10017	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer The Glen Rock Group LLC	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		

Full Name (Last, First, Middle Initial) B. Howard Greenberg		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2014	
Mailing Address 2 Grill Drive		Transaction ID : SA11AI.7356	
City St James	State NY	Zip Code 11780	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Howard E Greenberg Atty At Law	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) C. Howard Greenberg		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2014	
Mailing Address 2 Grill Drive		Transaction ID : SA11AI.8042	
City St James	State NY	Zip Code 11780	Amount of Each Receipt this Period _____ 60.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Howard E Greenberg Atty At Law	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 460.00		

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 20 OF 97
	<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)
Ken Greenberg

Mailing Address 119 Hamlet Dr

City State Zip Code
Mt Sinai NY 11766

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
216.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11A1.7602

Amount of Each Receipt this Period
216.00

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

Mailing Address One North End Ave
Suite 1117

City State Zip Code
New York NY 10282

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11A1.7618

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Charles Grinnell

Mailing Address 56 Fort Ave

City State Zip Code
Seaside Heights NY 08651

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

Name of Employer Occupation
DOD Office

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2014

Transaction ID : SA11A1.7686

Amount of Each Receipt this Period
500.00

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

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

1716.00

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

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

FOR LINE NUMBER: PAGE 21 OF 97
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Jean Claude Gruffat

Mailing Address 923 5th Ave

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Citigroup Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.7323

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2373 Broadway Apt 1927

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Infrastrure Capital Management CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : SA11AI.7376

Amount of Each Receipt this Period
2600.00

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

Mailing Address 7 Richard Path

City State Zip Code
St James NY 11780

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

Name of Employer Occupation
Lawrence Worden Rainis & Bard Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : SA11AI.7629

Amount of Each Receipt this Period
300.00

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

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

3900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 97
	<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)
Vanessa Herman

Mailing Address 237 Middle Island Road

City Medford State NY Zip Code 11763

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

Name of Employer Pace University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.8060

Amount of Each Receipt this Period
 60.00

Amount of Each Receipt this Period
 560.00

B. Full Name (Last, First, Middle Initial)
Jerry Herz

Mailing Address 63 Hunting Hill Drive

City Dix Hills State NY Zip Code 11746

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

Name of Employer Sterling Floors Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.7674

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 1250.00

C. Full Name (Last, First, Middle Initial)
Timothy Hogue

Mailing Address Dering Harbor

City Shelter Island State NY Zip Code 11965

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 31 / 2014

Transaction ID : SA11AI.8107

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

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

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

1310.00

**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 97
	<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)
Susan Hullin

Mailing Address 55 Strimples Mill Rd

City Stockton State NJ Zip Code 08559

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

Name of Employer Self Employed--Letter Sent Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.7395

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Tod Hullin

Mailing Address 55 Strimples Mill Rd

City Stockton State NJ Zip Code 08559

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

Name of Employer Self Employed--Letter Sent Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.7393

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 5 Forest Park Dr

City Farmington State CT Zip Code 06032

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

Name of Employer JWJ Advisors Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.7420

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

**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 24 OF 97
	<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--Letter Sent Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 23 / 2014

Transaction ID : SA11AI.7668

Amount of Each Receipt this Period
250.00

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

Mailing Address 354 Glenmore Lane

City Bayport State NY Zip Code 11705

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

Name of Employer Precision Transportation Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11AI.7344

Amount of Each Receipt this Period
500.00

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

Mailing Address 157 Warfield Way

City Southampton State NY Zip Code 11968

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.7927

Amount of Each Receipt this Period
100.00

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 25 OF 97
	<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)
Leo Kayser

Mailing Address 480 Park Ave

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Leo Kayser ESQ 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
 04 / 23 / 2014

Transaction ID : SA11AI.7445

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Scott Kirchofer

Mailing Address 27 Orchid St

City State Zip Code
Floral Park NY 11001

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

Name of Employer Occupation
NY City FDNY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 27 / 2014

Transaction ID : SA11AI.8321

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Katharine Knott

Mailing Address 232 Cleft Road

City State Zip Code
Mill Neck NY 11765

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
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.7496

Amount of Each Receipt this Period
2600.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 97
	<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)
Katharine Knott

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.7498

Amount of Each Receipt this Period
2600.00

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

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.7499

Amount of Each Receipt this Period
2600.00

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

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : SA11AI.7501

Amount of Each Receipt this Period
2600.00

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

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

7800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 97
	<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 Koch		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 667 Madison Ave 22nd Floor		Transaction ID : SA11AI.7477	
City New York	State NY	Zip Code 10065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Intrust Wealth Management	Occupation 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 Koch		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 667 Madison Ave 22nd Floor		Transaction ID : SA11AI.7479	
City New York	State NY	Zip Code 10065	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Intrust Wealth Management	Occupation 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) Pouya Lavian		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2014	
Mailing Address 301 East 45th Street Apt 15D		Transaction ID : SA11AI.7428	
City New York	State NY	Zip Code 10017	
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 2000.00		

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	5700.00

**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 97
	<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)
Debra Leible

Mailing Address 9 west 64th Street, 6F

City New York State NY Zip Code 10023

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

Name of Employer NYC Board of Elections Occupation EDO Coordinator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA11AI.7429

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 350.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Levy

Mailing Address 200 East 65th Street

City New York State NY Zip Code 10065

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

Name of Employer Grammys World of Toys Occupation Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : SA11AI.7375

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 4600.00

C. Full Name (Last, First, Middle Initial)
Wayne Losee

Mailing Address 21 Crescent Street

City Yaphank State NY Zip Code 11980-9707

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
 05 / 26 / 2014

Transaction ID : SA11AI.8115

Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
 350.00

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 29 OF 97
	<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)
Jack Louro

Mailing Address **2 Hunters Way**

City **Nissequogue** State **NY** Zip Code **11780**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2014

Transaction ID : SA11AI.7663

Amount of Each Receipt this Period
300.00

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

Mailing Address **108 Lynn Ave**

City **Hampton Bays** State **NY** Zip Code **11946**

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

Name of Employer **Shinnecock Hardware** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 24 / 2014

Transaction ID : SA11AI.7926

Amount of Each Receipt this Period
1000.00

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

Mailing Address **108 Lynn Ave**

City **Hampton Bays** State **NY** Zip Code **11946**

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

Name of Employer **Shinnecock Hardware** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 26 / 2014

Transaction ID : SA11AI.7684

Amount of Each Receipt this Period
500.00

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

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

1800.00

**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 97
	<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 **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.7904

Amount of Each Receipt this Period
250.00

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

Mailing Address **Left message for info**

City State Zip Code

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

Name of Employer **Info Requested Left Message** Occupation **Info 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
04 / 22 / 2014

Transaction ID : SA11AI.7426

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Donna Marder

Mailing Address **47 Searingtown Rd**

City **Albertson** State **NY** Zip Code **11507**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.7401

Amount of Each Receipt this Period
250.00

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: PAGE 31 OF 97
(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)
Robert Mercer

Mailing Address 600 Route 25A

City East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Tech 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 Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.7561

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 600 Route 25A

City East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Tech 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 Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.7563

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 520 Wolf Hill Rd

City Dix Hills State NY Zip Code 11746

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : SA11AI.7403

Amount of Each Receipt this Period
 250.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 97
	<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)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

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
 05 / 23 / 2014

Transaction ID : SA11AI.7921

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Murphy

Mailing Address 200 Atlantic Avenue

City State Zip Code
Blue Point NY 11715

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

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

Transaction ID : SA11AI.8097

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Bruce Nesenger

Mailing Address 2096 Medford Ave

City State Zip Code
Medford NY 11763

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

Name of Employer Occupation
112 Nesenger Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7316

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 33 OF 97
	<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)
Robert Odle Jr

Mailing Address 476 South Union St

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
Weil, Golshal & Manges LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7424

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Salvatore Paterno

Mailing Address 9 Springmeadow Dr

City State Zip Code
Kings Park NY 11754

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.7416

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joann Petosa

Mailing Address 14 Jagger Ct.

City State Zip Code
Melville NY 11747

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
220.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 20 / 2014

Transaction ID : SA11AI.7667

Amount of Each Receipt this Period
120.00

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

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

2970.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 97
	<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 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 Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.7569

Amount of Each Receipt this Period
 250.00

550.00

B. Full Name (Last, First, Middle Initial)
Vincent Puleo

Mailing Address 202 Smithtown Blvd

City Nesconset State NY Zip Code 11767

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

Name of Employer Town of Smithtown Occupation Town Clerk

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 20 / 2014

Transaction ID : SA11AI.7655

Amount of Each Receipt this Period
 150.00

450.00

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

Mailing Address P.O. Box 502

City Bohemia State NY Zip Code 11716

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.7584

Amount of Each Receipt this Period
 250.00

750.00

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 35 OF 97
	<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. Robert Affenita		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address PO Box 216		Transaction ID : SA11AI.7584.0	
City State Zip Code Bayport NY 11705	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM]		
Name of Employer Occupation Allcounty Block & Supply Corp Owner	Election Cycle-to-Date 1250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Ronald Rettner		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 374 Mclean Ave		Transaction ID : SA11AI.7397	
City State Zip Code Yonkers NY 10705	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Rettner Management Corp Owner	Election Cycle-to-Date 2600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. John Rose		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 2 Scotts Cove Lane		Transaction ID : SA11AI.7320	
City State Zip Code Setauket NY 11733	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Cella Bagels Owner	Election Cycle-to-Date 300.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	2650.00
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 36 OF 97
	<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. Jodi Rosenthal		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 1887 Muttontown Road		Transaction ID : SA11AI.7469	
City Muttontown	State NY	Zip Code 11791	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Housewife	Occupation Housewife		
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. Robert Rosenthal		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 1887 Muttontown Rd		Transaction ID : SA11AI.7472	
City Muttontown	State NY	Zip Code 11791	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer First Long Island Investors	Occupation Wealth Management		
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. Stephen Rush		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2014	
Mailing Address 90 Merrivale Road		Transaction ID : SA11AI.7407	
City Great Neck	State NY	Zip Code 11020	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NYU Langone Medical Center	Occupation Executive Director		
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).....	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: (check only one)	PAGE 37 OF 97
	<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)
Andrew Sabin

Mailing Address **One North End Ave
Suite 1231**

City **New York** State **NY** Zip Code **10282**

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

Name of Employer **Sabin Metal** Occupation **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
06 / 03 / 2014

Transaction ID : SA11AI.8610

Amount of Each Receipt this Period
2600.00

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

Mailing Address **One North End Ave
Suite 1231**

City **New York** State **NY** Zip Code **10282**

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

Name of Employer **Sabin Metal** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11AI.8612

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Frederick Schlomann

Mailing Address **237 Old Willets Path**

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
987.04

Date of Receipt
 M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.8688

Amount of Each Receipt this Period
923.04

In-kind - Mailing Expenses Paid

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

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

6123.04

**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 97
	<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)
Susan Schlomann

Mailing Address 237 Old Willets Path

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1037.05

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.8690

Amount of Each Receipt this Period
923.05

In-kind - Mailing Expenses Paid

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

Mailing Address 21 Hawkwood Lane

City State Zip Code
Greenwich CT 06830

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7487

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gail Shapiro

Mailing Address 62 Sackett St

City State Zip Code
Hicksville NY 11801

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : SA11AI.7436

Amount of Each Receipt this Period
2000.00

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

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

3173.05

**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 97
	<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)
Herbert Siegel

Mailing Address 55 East 59th St
Suite 22B

City New York State NY Zip Code 10022

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
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : SA11AI.7422

Amount of Each Receipt this Period
2000.00

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

Mailing Address 35 Split Rock Dr

City Kings Point State NY Zip Code 11024

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

Name of Employer Lifetime Brands Occupation 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
05 / 27 / 2014

Transaction ID : SA11AI.7911

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Scott Silberman

Mailing Address 25 Ely Rd

City Holmoel State NJ Zip Code 07733

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

Name of Employer SMS Engineering Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

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

Transaction ID : SA11AI.8056

Amount of Each Receipt this Period
400.00

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 97
	<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)
John Simmons

Mailing Address 9616 Tackroom lane

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
The Rossevelt Group Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2014

Transaction ID : SA11AI.7504

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
R Bram Smith

Mailing Address 14 Brook Hills Circle

City State Zip Code
White Plains NY 10605

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

Name of Employer Occupation
Lsta ED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : SA11AI.7512

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Cathy Soref

Mailing Address 10 Stoddart Ct

City State Zip Code
Locust Valley NY 11560

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7434

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 97
	<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)
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--Letter Sent Occupation Requested Info--Letter Sent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 09 / 2014

Transaction ID : SA11AI.7594

Amount of Each Receipt this Period
250.00

B. 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--Letter Sent Occupation Requested Info--Letter Sent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **660.00**

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

Transaction ID : SA11AI.8092

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Pete Stavrakoglou

Mailing Address 40 Sahdyview Crossing

City Manorville State NY Zip Code 11949

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

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

Transaction ID : SA11AI.8054

Amount of Each Receipt this Period
160.00

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

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

470.00

**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 42 OF 97
	<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)
James Sutton

Mailing Address 143 East Main St

City East Islip State NY Zip Code 11730

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

Name of Employer James F Sutton Agency Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 09 / 2014

Transaction ID : SA11AI.7582

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michael Swaner

Mailing Address 140 Albemarle Rd

City White Plains State NY Zip Code 10605

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : SA11AI.7380

Amount of Each Receipt this Period
250.00

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

Mailing Address 16 Brand St.

City Kings Park State NY Zip Code 11754

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

Name of Employer Indian Head Contracting Inc. Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 22 / 2014

Transaction ID : SA11AI.7628

Amount of Each Receipt this Period
150.00

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 43 OF 97
	<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)
Richard Tems

Mailing Address P.O. Box 276

City Jamison State PA Zip Code 18929

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
 05 / 17 / 2014

Transaction ID : SA11AI.7510

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Michael Toporek

Mailing Address 1172 Park Ave Apt 3A

City New York State NY Zip Code 10128

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

Name of Employer Brookstone Partners Occupation Private Equity

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11AI.7493

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 1172 Park Ave Apt 3A

City New York State NY Zip Code 10128

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

Name of Employer Brookstone Partners Occupation Private Equity

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 26 / 2014

Transaction ID : SA11AI.7495

Amount of Each Receipt this Period
 2600.00

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

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

5450.00

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

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

FOR LINE NUMBER: PAGE 44 OF 97
(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)
Tsunis Gasparis Lustig Ring & Kenney LLP

Mailing Address 2929 Expressway Drive

City State Zip Code
Islandia NY 11749

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

Name of Employer Occupation

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
 04 / 16 / 2014

Transaction ID : SA11AI.7483

Amount of Each Receipt this Period
 100.00
 Partnership

B. Full Name (Last, First, Middle Initial)
Tsunis Gasparis Lustig Ring & Kenney LLP

Mailing Address 2929 Expressway Drive

City State Zip Code
Islandia NY 11749

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2014

Transaction ID : SA11AI.9536

Amount of Each Receipt this Period
 900.00
 Partnership

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

Mailing Address 801 Motor Pkwy

City State Zip Code
Hauppauge NY 11788

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

Name of Employer Occupation
Tunis Gasparis Lustig Ring etl 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 Y Y
 04 / 16 / 2014

Transaction ID : SA11AI.9536.0

Amount of Each Receipt this Period
 900.00

[MEMO ITEM]

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: PAGE 45 OF 97
(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)
Robert Tucker

Mailing Address 230 Park Ave
Suite 440

City State Zip Code
New York NY 10169

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

Name of Employer Occupation
T & M Protection Resources CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : SA11AI.7480

Amount of Each Receipt this Period
1000.00

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

Mailing Address 63 Autumn Ridge Rd

City State Zip Code
Pound Ridge NY 10576

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

Name of Employer Occupation
GFI Group Corporate Bond Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : SA11AI.7327

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Frank Volz

Mailing Address 1537 13th Street

City State Zip Code
West Babylon NY 11704

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

Name of Employer Occupation
South Shore Speech & Language Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
530.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 28 / 2014

Transaction ID : SA11AI.8116

Amount of Each Receipt this Period
30.00

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

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

1530.00

**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 97
	<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)
Charles Wang

Mailing Address 880 3rd Ave
13th Floor

City State Zip Code
New York NY 10022

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
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : SA11AI.7390

Amount of Each Receipt this Period
1000.00

B. 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
450.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.7617

Amount of Each Receipt this Period
200.00
Partnership

C. Full Name (Last, First, Middle Initial)
Gary Weber

Mailing Address PO Box 158

City State Zip Code
Westhampton Beach NY 11978

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

Name of Employer Occupation
Weber & Weber Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2014

Transaction ID : SA11AI.7617.0

Amount of Each Receipt this Period
200.00

[MEMO ITEM]

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

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

1200.00

**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 97
	<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)
Edward Wehrheim

Mailing Address 20 Burr Avenue

City Kings Park State NY Zip Code 11754

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

Name of Employer Town of Smithtown Occupation Councilman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.7640

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
West Brookhaven Republican Club

Mailing Address 1 Firdale St

City Centereach State NY Zip Code 11720

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : SA11AI.7558

Amount of Each Receipt this Period
1000.00

Monies are from permissible Funds

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).....

1150.00

107716.82

**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 97
	<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 Paul Leszczynski

Mailing Address P.O Box 626

City Aquebogue State NY Zip Code 11931

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
 04 / 01 / 2014

Transaction ID : SA11C.7373

Amount of Each Receipt this Period
 100.00

Permissible Funds

B. 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
 05 / 12 / 2014

Transaction ID : SA11C.7597

Amount of Each Receipt this Period
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2600.00

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 97	
	<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. Alitalia Pizza		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 532 Montauk Highway		Amount of Each Disbursement this Period 137.86 Transaction ID : SB17.8644
City Center Moriches	State NY Zip Code 11934	
Purpose of Disbursement Pizza/Soda for Volunteers	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. John Alvarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 3 Grand Ave Apt#2		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.7860
City Islip	State NY Zip Code 11722	
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. AmTrak		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 41.00 Transaction ID : SB17.8641
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Train Ticket to DC	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		

SUBTOTAL of Disbursements This Page (optional).....	1678.86
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 50 OF 97	
	<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 MM / DD / YYYY 04 / 01 / 2014
Mailing Address 137 Hunter Avenue		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.7833
City No Babylon	State NY Zip Code 11703	
Purpose of Disbursement Campaign Salary	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. Vincent Belfiore		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address 137 Hunter Avenue		Amount of Each Disbursement this Period 123.80 Transaction ID : SB17.7847
City No Babylon	State NY Zip Code 11703	
Purpose of Disbursement Reimbursement for Office Expenses/Volunteers	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		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 16.27 Transaction ID : SB17.7847.3 [MEMO ITEM]
City Shirley	State NY Zip Code 11967	
Purpose of Disbursement Office Supplies/Folders	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).....	2523.80
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 51 OF 97	
	<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		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 24.97
City Shirley	State NY Zip Code 11967	
Purpose of Disbursement Ink Cartridge	Category/Type 001	Transaction ID : SB17.7847.6 [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. Vincent Belfiore		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 137 Hunter Avenue		Amount of Each Disbursement this Period 2400.00
City No Babylon	State NY Zip Code 11703	
Purpose of Disbursement Campaign Salary	Category/Type 001	Transaction ID : SB17.7831
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 MM / DD / YYYY 04 / 01 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 35882.00
City Pittsburgh	State PA Zip Code 15211	
Purpose of Disbursement TV/Radio	Category/Type 004	Transaction ID : SB17.7796
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).....	38282.00
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 52 OF 97			
	<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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.7798
City Pittsburgh State PA Zip Code 15211	Purpose of Disbursement Retainer for Advertising 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. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.7799
City Pittsburgh State PA Zip Code 15211	Purpose of Disbursement Retainer for Advertising 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. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 4880.57 Transaction ID : SB17.8664
City Pittsburgh State PA Zip Code 15211	Purpose of Disbursement TV/Radio 004 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).....	18880.57
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 53 OF 97			
	<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 M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.7797
City Pittsburgh	State PA	
Purpose of Disbursement Web Video		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) B. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 2652.00 Transaction ID : SB17.8665
City Pittsburgh	State PA	
Purpose of Disbursement TV/Radio		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. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.7742
City Pittsburgh	State PA	
Purpose of Disbursement Retainer for Advertising		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).....	10152.00
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 54 OF 97		
	<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 M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 38022.00 Transaction ID : SB17.7762
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement TV/Radio	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 04 / 22 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 3900.00 Transaction ID : SB17.8666
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement TV/Radio	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. Brabender Cox LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 38634.00 Transaction ID : SB17.7815
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Cable/Radio	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).....	80556.00
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 55 OF 97		
	<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 M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 13794.00 Transaction ID : SB17.8111
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Cable/TV	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) B. Justin Bryant		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 120 Knolls Dr		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.7834
City Stonybrook	State NY	
Zip Code 11790	Purpose of Disbursement Campaign Salary	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. Justin Bryant		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 120 Knolls Dr		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.7592
City Stonybrook	State NY	
Zip Code 11790	Purpose of Disbursement Office Work/Campaign Team	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).....	16794.00
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 56 OF 97		
	<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)		Date of Disbursement								
A. Cablevision		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>04 / 04 / 2014</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		04 / 04 / 2014				
M M / D D / Y Y Y Y										
04 / 04 / 2014										
Mailing Address 1111 Stewart Ave		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Bethpage</td> <td>NY</td> <td>11714</td> </tr> </table>		City	State	Zip Code	Bethpage	NY	11714	<table border="1"> <tr> <td>663.07</td> </tr> </table>		663.07
City	State	Zip Code								
Bethpage	NY	11714								
663.07										
Purpose of Disbursement Cable/Internet/Phones		Transaction ID : SB17.7790								
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								
State: NY District: 01		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								

Full Name (Last, First, Middle Initial)		Date of Disbursement								
B. Cablevision		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>04 / 23 / 2014</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		04 / 23 / 2014				
M M / D D / Y Y Y Y										
04 / 23 / 2014										
Mailing Address 1111 Stewart Ave		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Bethpage</td> <td>NY</td> <td>11714</td> </tr> </table>		City	State	Zip Code	Bethpage	NY	11714	<table border="1"> <tr> <td>182.56</td> </tr> </table>		182.56
City	State	Zip Code								
Bethpage	NY	11714								
182.56										
Purpose of Disbursement Cable/Internet/Phones		Transaction ID : SB17.7813								
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								
State: NY District: 01		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								

Full Name (Last, First, Middle Initial)		Date of Disbursement								
c. Cablevision		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> <td></td> </tr> <tr> <td>05 / 07 / 2014</td> <td></td> </tr> </table>		M M / D D / Y Y Y Y		05 / 07 / 2014				
M M / D D / Y Y Y Y										
05 / 07 / 2014										
Mailing Address 1111 Stewart Ave		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Bethpage</td> <td>NY</td> <td>11714</td> </tr> </table>		City	State	Zip Code	Bethpage	NY	11714	<table border="1"> <tr> <td>269.55</td> </tr> </table>		269.55
City	State	Zip Code								
Bethpage	NY	11714								
269.55										
Purpose of Disbursement Cable/Internet/Phones		Transaction ID : SB17.7590								
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								
State: NY District: 01		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								

SUBTOTAL of Disbursements This Page (optional).....	1115.18
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 57 OF 97			
	<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)		Date of Disbursement	
A. Campaigns Unlimited		M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley	State NY	Zip Code 11967	5925.00
Purpose of Disbursement Palm Cards/Printing		Category/Type 006	Transaction ID : SB17.7830
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)		Date of Disbursement	
B. Campaigns Unlimited		M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley	State NY	Zip Code 11967	13100.00
Purpose of Disbursement Lawn Signs		Category/Type 006	Transaction ID : SB17.7869
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)		Date of Disbursement	
C. Campaigns Unlimited		M M / D D / Y Y Y Y 05 / 23 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley	State NY	Zip Code 11967	332.03
Purpose of Disbursement Postage		Category/Type 001	Transaction ID : SB17.7721
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).....	19357.03
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 58 OF 97			
	<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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 4300.00 Transaction ID : SB17.7825
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Advertising 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) B. Castle Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 4050.00 Transaction ID : SB17.7826
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Advertising 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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1593 Spring Hill rd Suite 400		Amount of Each Disbursement this Period 229.18 Transaction ID : SB17.7822
City Tysons Corner	State VA	
Zip Code 22182	Purpose of Disbursement Credit Card Fees	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	8579.18
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 59 OF 97			
	<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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1593 Spring Hill rd Suite 400		Amount of Each Disbursement this Period 733.23 Transaction ID : SB17.8652
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Credit card monthly 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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 1593 Spring Hill rd Suite 400		Amount of Each Disbursement this Period 54.80 Transaction ID : SB17.8654
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement Credit card fees	Category/Type 001	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Consolidated Fuel Oil Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address P.O. Box 2270		Amount of Each Disbursement this Period 856.87 Transaction ID : SB17.7789
City St. James	State NY Zip Code 11780	
Purpose of Disbursement Fuel	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).....	1644.90
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 60 OF 97	
	<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. Consolidated Fuel Oil Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address P.O. Box 2270		Amount of Each Disbursement this Period 791.47 Transaction ID : SB17.7732
City St. James	State NY	
Zip Code 11780	Purpose of Disbursement Oil	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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4000 Stonegate Dr Apt 4104		Amount of Each Disbursement this Period 341.17 Transaction ID : SB17.7839
City Rensselaer	State NY	
Zip Code 12144	Purpose of Disbursement Reimbursements	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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 32.91 Transaction ID : SB17.7839.0 [MEMO ITEM]
City Miami	State FL	
Zip Code 33178	Purpose of Disbursement Phone Refill	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).....	1132.64
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 61 OF 97	
	<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. Straight Talk Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 9700 NW 112th Avenue		Amount of Each Disbursement this Period 32.91
City Miami State FL Zip Code 33178	Purpose of Disbursement Phone Refill	
Candidate Name Zeldin For Congress	Category/Type 001	Transaction ID : SB17.7839.1 [MEMO ITEM]
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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 250.00
City Phoenix State AZ Zip Code 85034	Purpose of Disbursement Air Ticket to Washington	
Candidate Name Zeldin For Congress	Category/Type 002	Transaction ID : SB17.7839.4 [MEMO ITEM]
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. Alexander Damianos		Date of Disbursement M M / D D / Y Y Y Y 06 / 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 - June Rent	
Candidate Name	Category/Type	Transaction ID : SB17.8686
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1164.80
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 62 OF 97			
	<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. John Damianos			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 14 Blueberry Ridge Road			Amount of Each Disbursement this Period 1223.67	
City Setauket	State NY	Zip Code 11733	Transaction ID : SB17.8679	
Purpose of Disbursement In-kind - Rent		Candidate Name	Category/ Type	
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. John Damianos			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 14 Blueberry Ridge Road			Amount of Each Disbursement this Period 152.66	
City Setauket	State NY	Zip Code 11733	Transaction ID : SB17.9544	
Purpose of Disbursement In-kind - Rent		Candidate Name	Category/ Type	
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:				

Full Name (Last, First, Middle Initial) c. Markella Damianos			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014	
Mailing Address One Meadow Gate East			Amount of Each Disbursement this Period 270.40	
City Head of the Harbor	State NY	Zip Code 11780	Transaction ID : SB17.8681	
Purpose of Disbursement In-kind -HQ Rent		Candidate Name	Category/ Type	
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).....	1646.73
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 63 OF 97		
	<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 04 / 01 / 2014
Mailing Address One Meadow Gate East		Amount of Each Disbursement this Period 894.40 Transaction ID : SB17.9535
City State Zip Code Head of the Harbor NY 11780	Purpose of Disbursement In-kind -HQ Rent	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Markella Damianos		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address One Meadow Gate East		Amount of Each Disbursement this Period 1164.80 Transaction ID : SB17.8683
City State Zip Code Head of the Harbor NY 11780	Purpose of Disbursement In-kind - HQ Rent	
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Jennifer Disiena		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 22 Pine Dr		Amount of Each Disbursement this Period 136.50 Transaction ID : SB17.7712
City State Zip Code Woodbury NY 11797	Purpose of Disbursement Office Work	
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).....	2195.70
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 64 OF 97		
	<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. Eastern American Data

Full Name (Last, First, Middle Initial)
Mailing Address P.O Box 8043

City State Zip Code
Long Island City NY 11101

Purpose of Disbursement
Copier Rental for Office

Candidate Name
Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement
M M / D D / Y Y Y Y
04 / 01 / 2014

Amount of Each Disbursement this Period
323.70

Transaction ID : SB17.7793

Category/Type
001

B. Eastern American Data

Full Name (Last, First, Middle Initial)
Mailing Address P.O Box 8043

City State Zip Code
Long Island City NY 11101

Purpose of Disbursement
Copier Rental for Office

Candidate Name
Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement
M M / D D / Y Y Y Y
04 / 16 / 2014

Amount of Each Disbursement this Period
323.70

Transaction ID : SB17.7792

Category/Type
001

C. Eastern American Data

Full Name (Last, First, Middle Initial)
Mailing Address P.O Box 8043

City State Zip Code
Long Island City NY 11101

Purpose of Disbursement
Toners for Copy Machine

Candidate Name
Zeldin For Congress

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement
M M / D D / Y Y Y Y
04 / 25 / 2014

Amount of Each Disbursement this Period
184.66

Transaction ID : SB17.7734

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 832.06

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 65 OF 97			
	<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. Eastern American Data

Full Name (Last, First, Middle Initial)
Mailing Address P.O Box 8043

City Long Island City State NY Zip Code 11101

Purpose of Disbursement Copier Rental for Office

Candidate Name **Zeldin For Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: NY District: 01

Date of Disbursement: 04 / 25 / 2014

Amount of Each Disbursement this Period: 323.70

Transaction ID : SB17.7794

Category/Type: 001

B. Empire Nat'l Bank

Full Name (Last, First, Middle Initial)
Mailing Address 1044 William Floyd Parkway

City Shirley State NY Zip Code 11967

Purpose of Disbursement Bank 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: 04 / 30 / 2014

Amount of Each Disbursement this Period: 60.00

Transaction ID : SB17.8632

Category/Type: 001

c. Empire Nat'l Bank

Full Name (Last, First, Middle Initial)
Mailing Address 1044 William Floyd Parkway

City Shirley State NY Zip Code 11967

Purpose of Disbursement Bank 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: 05 / 14 / 2014

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.8639

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 413.70

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 66 OF 97	
	<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)		Date of Disbursement
A. Global Payments		M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period
City State Zip Code Rockville MD 20855		55.91
Purpose of Disbursement Credit Card Fees		Transaction ID : SB17.8655
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)		Date of Disbursement
B. Global Payments		M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period
City State Zip Code Rockville MD 20855		49.34
Purpose of Disbursement Credit Card Fees		Transaction ID : SB17.8661
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)		Date of Disbursement
c. GMG Printing & Marketing		M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period
City State Zip Code Shirley NY 11967		20314.08
Purpose of Disbursement Postage for Mailing		Transaction ID : SB17.7884
Candidate Name Zeldin For Congress		Category/Type 004
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).....	20419.33
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 67 OF 97		
	<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. GMG Printing & Marketing		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 6842.00 Transaction ID : SB17.7885
City Shirley	State NY	
Purpose of Disbursement Printing/Mailing	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	

Full Name (Last, First, Middle Initial) B. GMG Printing & Marketing		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 3609.02 Transaction ID : SB17.7870
City Shirley	State NY	
Purpose of Disbursement Postage/Mailing	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. Belinda Groneman		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 3357.31 Transaction ID : SB17.7928
City East Islip	State NY	
Purpose of Disbursement Reimbursement Expenses for Headquarters	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).....	13808.33
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 68 OF 97	
	<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. New York Husco		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 50.54
City Islip	State NY	
Zip Code 11751	Purpose of Disbursement Gas	Transaction ID : SB17.7928.9 [MEMO ITEM]
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) B. Staples East Islip		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 25.39
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Office Folders	Transaction ID : SB17.7928.14 [MEMO ITEM]
Candidate Name Zeldin For Congress	Category/Type 006	
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 East Islip		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 97.95
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Office Supplies	Transaction ID : SB17.7928.16 [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).....	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 69 OF 97			
	<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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 79.00
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7928.18 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Costco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 125 Beacon Dr		Amount of Each Disbursement this Period 315.17
City Holbrook	State NY	
Purpose of Disbursement Office Snacks and Drinks for all Offices	Category/ Type 001	Transaction ID : SB17.7928.19 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01		

Full Name (Last, First, Middle Initial) c. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 71.35
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7928.20 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01		

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 70 OF 97	
	<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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 72.00
City Islip	State NY	
Zip Code 11751		
Purpose of Disbursement Gas		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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 45.41
City Islip	State NY	
Zip Code 11751		
Purpose of Disbursement Gas		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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 50.00
City Islip	State NY	
Zip Code 11751		
Purpose of Disbursement Gas		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	

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 71 OF 97	
	<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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 50.07
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7928.24 [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. Staples Stony Brook		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 1702.01
City Stony Brook	State NY	
Purpose of Disbursement Office Supplies	Category/ Type 001	Transaction ID : SB17.7928.25 [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) c. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 71.00
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7928.30 [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	

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 72 OF 97	
	<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. Belinda Groneman		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 1388.47 Transaction ID : SB17.7986
City East Islip State NY Zip Code 11730	Purpose of Disbursement Expense Reimbursements for Headquarters 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. Staples East Islip		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 13.35 Transaction ID : SB17.7986.3 [MEMO ITEM]
City East Islip State NY Zip Code 11730	Purpose of Disbursement Office Supplies 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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 68.41 Transaction ID : SB17.7986.7 [MEMO ITEM]
City Islip State NY Zip Code 11751	Purpose of Disbursement Gas 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).....	1388.47
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 73 OF 97			
	<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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 60.00
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7986.9 [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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 73.00
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7986.10 [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) c. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 34.35
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.7986.11 [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	

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 74 OF 97	
	<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. Walmart		Date of Disbursement MM / DD / YYYY 04 / 11 / 2014
Mailing Address 161 Centereach Mall		Amount of Each Disbursement this Period 84.67
City Centereach State NY Zip Code 11720	Purpose of Disbursement Gas	Transaction ID : SB17.7986.12
Candidate Name Zeldin For Congress	Category/Type 002	[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. Staples Inc		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 526 Route 111		Amount of Each Disbursement this Period 89.29
City Hauppauge State NY Zip Code 11788	Purpose of Disbursement Ink Cartridges	Transaction ID : SB17.7986.13
Candidate Name Zeldin For Congress	Category/Type 006	[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) c. Staples Stony Brook		Date of Disbursement MM / DD / YYYY 04 / 08 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 597.43
City Stony Brook State NY Zip Code 11790	Purpose of Disbursement Computer	Transaction ID : SB17.7986.15
Candidate Name Zeldin For Congress	Category/Type 001	[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).....	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 75 OF 97			
	<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. Belinda Groneman		Date of Disbursement MM / DD / YYYY 04 / 23 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 743.62 Transaction ID : SB17.8009
City East Islip	State NY Zip Code 11730	
Purpose of Disbursement Expense Reimbursement for Airline Ticket		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. Verizon		Date of Disbursement MM / DD / YYYY 04 / 15 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 112.62 Transaction ID : SB17.8009.0 [MEMO ITEM]
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Phone Bill		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. Jet Blue		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address JFK Expressway		Amount of Each Disbursement this Period 631.00 Transaction ID : SB17.8009.1 [MEMO ITEM]
City New York	State NY Zip Code 11430	
Purpose of Disbursement Jet Blue Plane Ticket		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	

SUBTOTAL of Disbursements This Page (optional).....	743.62
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 76 OF 97		
	<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. Harleysville Insurance		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box 37712		Amount of Each Disbursement this Period 21.12 Transaction ID : SB17.7755
City Philadelphia	State PA Zip Code 19101	
Purpose of Disbursement Insurance	Category/Type 001	
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. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address William Floyd Parkway		Amount of Each Disbursement this Period 794.67 Transaction ID : SB17.8635
City Shirley	State NY Zip Code 11967	
Purpose of Disbursement 4x4 Poles For Signs	Category/Type 004	
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. HSP Direct		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 13755 Sunrise Valley Dr Suite 450		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8659
City Herndon	State VA Zip Code 20171	
Purpose of Disbursement Direct Mail Fundraising	Category/Type 006	
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).....	1815.79
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 77 OF 97			
	<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 M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7836
City Smithtown	State NY	
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 M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.7814
City Smithtown	State NY	
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) c. Keegan Enterprise		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8109
City Smithtown	State NY	
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	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
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 78 OF 97	
	<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 M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 24 Bellemeade Avenue		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.8110
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. Lighthouse Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.7827
City Garden City	State NY	
Zip Code 11530	Purpose of Disbursement Retainer For Campaign Manager	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 M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.7828
City Garden City	State NY	
Zip Code 11530	Purpose of Disbursement Retainer for Campaign Manager	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).....	15350.00
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 79 OF 97	
	<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 04 / 01 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.7829
City Garden City State NY Zip Code 11530	Purpose of Disbursement Retainer for Campaign Manager 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. Lighthouse Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 151 Brompton Road		Amount of Each Disbursement this Period 7500.00 Transaction ID : SB17.7588
City Garden City State NY Zip Code 11530	Purpose of Disbursement Retainer for Campaign Manager 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. L I Screen Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 45 Ramsey Rd Unit 20		Amount of Each Disbursement this Period 641.97 Transaction ID : SB17.7723
City Shirley State NY Zip Code 11967	Purpose of Disbursement Supplies 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).....	10641.97
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 80 OF 97	
	<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. Majority Strategies		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 135 Professional drive Suite 104		Amount of Each Disbursement this Period 1250.00 Transaction ID : SB17.7819
City Ponte Vedra Beach	State FL	
Zip Code 32082	Purpose of Disbursement Mailing/Design	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	

Full Name (Last, First, Middle Initial) B. Nancy Marks		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 608.00 Transaction ID : SB17.7872
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Reimburse Plane Ticket to Las Vegas	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. Jet Blue		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address JFK Expressway		Amount of Each Disbursement this Period 608.00 Transaction ID : SB17.7872.0 [MEMO ITEM]
City New York	State NY	
Zip Code 11430	Purpose of Disbursement Plane Ticket to Las Vegas	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	

SUBTOTAL of Disbursements This Page (optional).....	1858.00
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 81 OF 97			
	<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 04 / 25 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 278.56 Transaction ID : SB17.7879
City Shirley	State NY	
Purpose of Disbursement Reimbursement for Paper		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. Paper Division Inc		Date of Disbursement MM / DD / YYYY 04 / 25 / 2014
Mailing Address 1595C Smithtown Ave		Amount of Each Disbursement this Period 278.56 Transaction ID : SB17.7879.0 [MEMO ITEM]
City Bohemia	State NY	
Purpose of Disbursement Office Paper		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 04 / 30 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 94.99 Transaction ID : SB17.7886
City Shirley	State NY	
Purpose of Disbursement Reimbursement Expenses for Campaign Materials		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	

SUBTOTAL of Disbursements This Page (optional).....	373.55
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 82 OF 97			
	<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 05 / 02 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 813.60 Transaction ID : SB17.7875
City Shirley	State NY	
Purpose of Disbursement Reimbursement for Toner	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. 4 Ink Jets		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 3700 Cover Street		Amount of Each Disbursement this Period 813.60 Transaction ID : SB17.7875.0 [MEMO ITEM]
City Long Beach	State CA	
Purpose of Disbursement Toner	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 05 / 23 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 1160.00 Transaction ID : SB17.7722
City Shirley	State NY	
Purpose of Disbursement Event	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	

SUBTOTAL of Disbursements This Page (optional).....	1973.60
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 83 OF 97			
	<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. McLaughlin & Associates Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 17093.00 Transaction ID : SB17.7759
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Interviews 004 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. Merchant E-Solutions		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 13305		Amount of Each Disbursement this Period 154.20 Transaction ID : SB17.8672
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Fees 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. Merchant E-Solutions		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address PO Box 13305		Amount of Each Disbursement this Period 348.26 Transaction ID : SB17.8676
City Spokane State WA Zip Code 99213	Purpose of Disbursement Credit Card Fees 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).....	17595.46
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 84 OF 97	
	<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 04 / 14 / 2014
Mailing Address 306 Aster Road		Amount of Each Disbursement this Period 62.00 Transaction ID : SB17.7862
City West Islip	State NY	
Zip Code 11795	Purpose of Disbursement Expense Reimbursement	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. Kevin Morello		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014
Mailing Address 306 Aster Road		Amount of Each Disbursement this Period 1800.00 Transaction ID : SB17.7832
City West Islip	State NY	
Zip Code 11795	Purpose of Disbursement Campaign Salary/Data Entry	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. Oorbeek Morehouse Strategies, LLC		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address 5614 Garnetts Farm Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.7820
City Haymarket	State VA	
Zip Code 20169	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).....	3862.00
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 85 OF 97			
	<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. Paper Division Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1595C Smithtown Ave		Amount of Each Disbursement this Period 369.87 Transaction ID : SB17.7725
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Office Paper 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. PDQ Print and Mail Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 8452.89 Transaction ID : SB17.8112
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Invites/Postage/Mailing 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. PDQ Print and Mail Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 15386.03 Transaction ID : SB17.7800
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Print/Mail 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		

SUBTOTAL of Disbursements This Page (optional).....	24208.79
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 86 OF 97			
	<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		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 297.00 Transaction ID : SB17.7801
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Printing 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) B. PDQ Print and Mail Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 11043.55 Transaction ID : SB17.7802
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Print/Mail 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. PDQ Print and Mail Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 15386.03 Transaction ID : SB17.7803
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Mailing 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		

SUBTOTAL of Disbursements This Page (optional).....	26726.58
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 87 OF 97			
	<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		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 565.00 Transaction ID : SB17.7804
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Print 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) B. PDQ Print and Mail Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 620.00 Transaction ID : SB17.7895
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Print 4x4 004 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 M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 13592.38 Transaction ID : SB17.7896
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Mailing/Printing 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		

SUBTOTAL of Disbursements This Page (optional).....	14777.38
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 88 OF 97			
	<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 04 / 04 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.8647
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Credit Card Fees 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. Political Network		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO Box 21383		Amount of Each Disbursement this Period 4880.57 Transaction ID : SB17.7805
City Columbus State OH Zip Code 43221	Purpose of Disbursement Tele Town Hall 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. Political Network		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address PO Box 21383		Amount of Each Disbursement this Period 2652.00 Transaction ID : SB17.7807
City Columbus State OH Zip Code 43221	Purpose of Disbursement Tele Town Hall 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		

SUBTOTAL of Disbursements This Page (optional).....	7561.57
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 89 OF 97			
	<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. Political Network		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address PO Box 21383		Amount of Each Disbursement this Period 1069.46 Transaction ID : SB17.7806
City Columbus	State OH	
Zip Code 43221	Purpose of Disbursement Tele Town Hall	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	

Full Name (Last, First, Middle Initial) B. Riverhead Republican Committee		Date of Disbursement MM / DD / YYYY 04 / 03 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.7808
City Riverhead	State NY	
Zip Code 11901	Purpose of Disbursement Lease	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. Riverhead Republican Committee		Date of Disbursement MM / DD / YYYY 05 / 01 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.7816
City Riverhead	State NY	
Zip Code 11901	Purpose of Disbursement Lease	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).....	1769.46
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 90 OF 97			
	<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. Frederick Schlomann			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 237 Old Willets Path			Amount of Each Disbursement this Period 923.04 Transaction ID : SB17.8689
City Smithtown	State NY	Zip Code 11787	
Purpose of Disbursement In-kind - Mailing Expenses Paid		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. Susan Schlomann			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 237 Old Willets Path			Amount of Each Disbursement this Period 923.05 Transaction ID : SB17.8691
City Smithtown	State NY	Zip Code 11787	
Purpose of Disbursement In-kind - Mailing Expenses Paid		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. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2702 Love Field Dr			Amount of Each Disbursement this Period 546.50 Transaction ID : SB17.8626
City Dallas	State TX	Zip Code 75235	
Purpose of Disbursement Southwest Airline Ticket to DC		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			

SUBTOTAL of Disbursements This Page (optional).....	2392.59
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 91 OF 97		
	<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. Square Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 1455 Market Street Ste 600		Amount of Each Disbursement this Period 144.60 Transaction ID : SB17.8621
City San Francisco State CA Zip Code 94103	Purpose of Disbursement Square Credit Card Fees 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. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 327.57 Transaction ID : SB17.8620
City Shirley State NY Zip Code 11967	Purpose of Disbursement Office Supplies 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. Staples Stony Brook		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 708.44 Transaction ID : SB17.8617
City Stony Brook State NY Zip Code 11790	Purpose of Disbursement Office Supplies for Headquarters 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).....	1180.61
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 92 OF 97	
	<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 Stony Brook		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 268.17 Transaction ID : SB17.8619
City Stony Brook	State NY	
Zip Code 11790	Purpose of Disbursement Office Supplies for Headquarters	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 Stony Brook		Date of Disbursement MM / DD / YYYY 05 / 09 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 101.31 Transaction ID : SB17.8638
City Stony Brook	State NY	
Zip Code 11790	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) c. Suffolk Board of Elections		Date of Disbursement MM / DD / YYYY 04 / 09 / 2014
Mailing Address Yaphank Ave		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.7835
City Yaphank	State NY	
Zip Code 11980	Purpose of Disbursement Voter Info	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).....	444.48
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 93 OF 97			
	<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 Postmaster		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 2,000.00 Transaction ID : SB17.7714
City Shirley	State NY	
Purpose of Disbursement Stamps	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	

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement MM / DD / YYYY 05 / 28 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 490.00 Transaction ID : SB17.7894
City Shirley	State NY	
Purpose of Disbursement Stamps	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	

Full Name (Last, First, Middle Initial) c. Verizon		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 508.82 Transaction ID : SB17.7740
City Albany	State NY	
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).....	2615.82
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 94 OF 97			
	<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. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 638.87
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cell Phones	Category/Type 001	Transaction ID : SB17.7809
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. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 388.52
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Cell Phones	Category/Type 001	Transaction ID : SB17.7741
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 M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 512.32
City Albany	State NY Zip Code 12212	
Purpose of Disbursement Phone Bill	Category/Type 001	Transaction ID : SB17.8668
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).....	1539.71
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 95 OF 97			
	<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. Verizon		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 797.77
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phones	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7818
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. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 384.08
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phones	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7589
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) c. Verizon		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 71.66
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phones	
Candidate Name Zeldin For Congress		Transaction ID : SB17.7586
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).....	1253.51
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 97	
	<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. Versus, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 101 Park Ave Suite 2506		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.7811
City New York State NY Zip Code 10178	Purpose of Disbursement Retainer 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. Washington Intelligence Bureau		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.8657
City Chantilly State VA Zip Code 20151	Purpose of Disbursement Postage & Delivery 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. Washington Intelligence Bureau		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.8658
City Chantilly State VA Zip Code 20151	Purpose of Disbursement Postage & Delivery 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		

SUBTOTAL of Disbursements This Page (optional).....	5450.00
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 97			
	<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. Widget Maker		Date of Disbursement MM / DD / YYYY 05 / 05 / 2014
Mailing Address 1593 Springhill Road		Amount of Each Disbursement this Period 557.55 Transaction ID : SB17.8677
City Tysons Corner State VA Zip Code 22182	Purpose of Disbursement Credit Card Fees 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. Widget Maker		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 1593 Springhill Road		Amount of Each Disbursement this Period 173.60 Transaction ID : SB17.8645
City Tysons Corner State VA Zip Code 22182	Purpose of Disbursement Credit Card Fees 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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	731.15
TOTAL This Period (last page this line number only).....	390430.92