

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
Shirley NY 11967
Check if different than previously reported. (ACC)
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00552547
3. IS THIS REPORT NEW (N) OR AMENDED (A)
STATE DISTRICT NY 01

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2023 through M M / D D / Y Y Y Y 03 / 31 / 2023

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 Marks, Nancy, , ,
Signature of Treasurer Marks, Nancy, , , [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

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))....	0.00	0.00
(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)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	10768.85	11508.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	2754.46	2754.46
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8014.39	8754.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
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 05/2016)

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	0.00
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.)	2754.46	2754.46
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)..... ▶	2754.46	2754.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10768.85	11508.85
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) ►	10768.85	11508.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8014.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2754.46
25. SUBTOTAL (add Line 23 and Line 24).....	10768.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10768.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 12
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 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)
ZELDIN FOR NEW YORK

Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

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

Name of Employer Occupation

Receipt For: 2024
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2689.46

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2023

Transaction ID : SA14.33281

Amount of Each Receipt this Period
2689.46

Memo Item
PARTIAL REFUND OF TRANSFER ON 7/11/2022

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2689.46
TOTAL This Period (last page this line number only)..... ▶	2689.46

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 6 OF 12	
	<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. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2023	
Mailing Address 200 VESEY STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10285	Amount of Each Disbursement this Period 4543.67	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.I31955	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ PRIMARY			
State: District:				

Full Name (Last, First, Middle Initial) B. AMTRAK CORPORATE OFFICE			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2022	
Mailing Address 60 MASSACHUSETTES AVE NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 606.00	
Purpose of Disbursement TRAIN FARE		Category/ Type 002	Transaction ID : SB17.I32078	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CAPITOL HILL HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2022	
Mailing Address 200 C STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1108.99	
Purpose of Disbursement HOTEL STAY		Category/ Type 002	Transaction ID : SB17.I33282	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4543.67
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 12	
	<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. CAPITOL HILL HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2022	
Mailing Address 200 C STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1079.96	
Purpose of Disbursement HOTEL STAY		Category/ Type 002	Transaction ID : SB17.I33283	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CAPITOL HILL HOTEL			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2022	
Mailing Address 200 C STREET SOUTHEAST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1193.95	
Purpose of Disbursement HOTEL STAY		Category/ Type 002	Transaction ID : SB17.I33284	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. OFFICINA AT THE WHARF			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2022	
Mailing Address 1120 MAINE AVENUE SOUTHWEST			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20024	Amount of Each Disbursement this Period 31.00	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type 001	Transaction ID : SB17.I32081	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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 8 OF 12	
	<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. OFFICINA AT THE WHARF

Full Name (Last, First, Middle Initial)
Mailing Address 1120 MAINE AVENUE SOUTHWEST

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement FOOD AND BEVERAGE Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 133.02

Transaction ID : SB17.I32082

Memo Item

B. THE SMITH

Full Name (Last, First, Middle Initial)
Mailing Address 1900 BROADWAY AVE

City NEW YORK State NY Zip Code 10023

Purpose of Disbursement FOOD & BEVERAGE Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 07 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 209.00

Transaction ID : SB17.I32071

Memo Item

C. UBER HEADQUARTERS

Full Name (Last, First, Middle Initial)
Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement TAXI FARE Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2022

FEC Identification Number: C

Amount of Each Disbursement this Period: 13.63

Transaction ID : SB17.I32068

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12			
	<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. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2022		
Mailing Address 1455 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 15.44		
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32069		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022		
Mailing Address 1455 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 13.63		
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32072		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022		
Mailing Address 1455 MARKET STREET			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 29.12		
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32073		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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 10 OF 12	
	<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. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 12.72	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32074	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 20.96	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32076	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 16.19	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32079	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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 11 OF 12	
	<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. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 12.29	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32080	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 13.74	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32083	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. UBER HEADQUARTERS			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2022	
Mailing Address 1455 MARKET STREET			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94102	Amount of Each Disbursement this Period 34.03	
Purpose of Disbursement TAXI FARE		Category/ Type 002	Transaction ID : SB17.I32084	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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 12 OF 12	
	<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. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2023	
Mailing Address 200 VESEY STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10285	Amount of Each Disbursement this Period 425.18	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.I31956	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ PRIMARY			
State: District:				

Full Name (Last, First, Middle Initial) B. U.S. MARSHAL'S SERVICE			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2023	
Mailing Address 33 LIBERTY STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10045	Amount of Each Disbursement this Period 5800.00	
Purpose of Disbursement REFUND OF RYAN SALAME DONATION		Category/ Type 010	Transaction ID : SB17.I33279	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ PRIMARY			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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).....▶	6225.18
TOTAL This Period (last page this line number only).....▶	10768.85