

**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 241
	<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

Full Name (Last, First, Middle Initial) A. Joseph DiMaggio		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2016	
Mailing Address 75 Hickman St		Transaction ID : SA11AI.24694	
City Syosset	State NY	Zip Code 11791	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Masters Pest Control	Occupation Pest Control Operator		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Steve Einhorn		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 22 / 2016	
Mailing Address 27 Herrick Dr		Transaction ID : SA11AI.23697	
City Lawrence	State NY	Zip Code 11559	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Omega Advisors	Occupation Portfolio Manager		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Igal Elyassi		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 11 / 2016	
Mailing Address 6200 Wilshire Blvd Ste 1609		Transaction ID : SA11AI.24017	
City Los Angeles	State CA	Zip Code 90048	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Igal Elyassi D.D.S	Occupation Dentist		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2000.00
TOTAL This Period (last page this line number only).....	_____