

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))....	159138.70	1798065.61
(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)).....	159138.70	1798065.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	424650.66	1731858.74
(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)).....	424650.66	1731858.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	42688.37	
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).....	92576.83	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

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 Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="87181.00"/>	<input type="text" value="1291081.36"/>	<input type="text" value="500.00"/>
(ii) Unitemized		
<input type="text" value="16453.64"/>	<input type="text" value="151649.60"/>	<input type="text" value="516.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="103634.64"/>	<input type="text" value="1442730.96"/>	<input type="text" value="1016.00"/>
(b) Political Party Committees		
<input type="text" value="995.00"/>	<input type="text" value="35151.80"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="54509.06"/>	<input type="text" value="320182.85"/>	<input type="text" value="2500.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 123

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<p>(d) The Candidate</p>		
0.00	0.00	0.00
<p>(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))</p>		
159138.70	1798065.61	3516.00
<p>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</p>		
0.00	0.00	0.00
<p>13. LOANS:</p>		
<p>(a) Made or Guaranteed by the Candidate</p>		
0.00	0.00	0.00
<p>(b) All Other Loans</p>		
0.00	0.00	0.00
<p>(c) TOTAL LOANS (add Lines 13(a) and (b))</p>		
0.00	0.00	0.00
<p>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)</p>		
0.00	0.00	0.00
<p>15. OTHER RECEIPTS (Dividends, Interest, etc.)</p>		
0.00	0.00	0.00
<p>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</p>		
159138.70	1798065.61	3516.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Zeldin For Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="424650.66"/>	<input type="text" value="1731858.74"/>	<input type="text" value="27034.50"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 123

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

424650.66	1731858.74	27034.50
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

159138.70	1798065.61	3516.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

424650.66	1731858.74	27034.50
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	308200.33
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	159138.70
25. SUBTOTAL (add Line 23 and Line 24).....	467339.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	424650.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	42688.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Miriam Adelson
Full Name (Last, First, Middle Initial)
Mailing Address 410 South Rampart Blvd Ste 440

City Las Vegas	State NY	Zip Code 89145
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FEC ID number of contributing federal political committee. **C**

Name of Employer Miriam Adelson M.D.	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11AI.14108

Amount of Each Receipt this Period
2600.00

B. Sheldon Adelson
Full Name (Last, First, Middle Initial)
Mailing Address 410 South Rampart Blvd Ste 440

City Las Vegas	State NV	Zip Code 89145
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FEC ID number of contributing federal political committee. **C**

Name of Employer Las Vegas Sands	Occupation Owner
-------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11AI.14489

Amount of Each Receipt this Period
2600.00

C. Shelley Adelson
Full Name (Last, First, Middle Initial)
Mailing Address 20 Sankaty Circle

City Henderson	State NV	Zip Code 89052
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2014

Transaction ID : SA11AI.14491

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 8 OF 123	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Heath Adler		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2014
Mailing Address 185 Avalon Circle		Transaction ID : SA11AI.14370
City Smithtown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer PSNY	Occupation Sr Executive	Election Cycle-to-Date 400.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Thruchr Arcmusm		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 203 Fairfield Dr East		Transaction ID : SA11AI.14078
City Holbrook	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Long Island Group	Occupation Physician	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Atlantic Hyundai LLC		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 193-205 Sunrise Highway		Transaction ID : SA11AI.14908
City West Islip	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1600.00
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 9 OF 123
	<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)
Jacquelyn Bruscia

Mailing Address 110 Cooper Street

City: Babylon State: NY Zip Code: 11702

FEC ID number of contributing federal political committee: C

Name of Employer: Atlantic Auto Mall Occupation: Comptroller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 10 / 30 / 2014

Transaction ID : SA11AI.14908.0

Amount of Each Receipt this Period: 500.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Auto Mall Nissan LLC

Mailing Address 193-205 Sunrise Highway

City: West Islip State: NY Zip Code: 11795

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: 10 / 31 / 2014

Transaction ID : SA11AI.14116

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 110 Cooper Street

City: Babylon State: NY Zip Code: 11702

FEC ID number of contributing federal political committee: C

Name of Employer: Atlantic Auto Mall Occupation: Comptroller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 10 / 31 / 2014

Transaction ID : SA11AI.14116.0

Amount of Each Receipt this Period: 1000.00

[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: (check only one)	PAGE 10 OF 123
	<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)
Baiting Hollow Advisors LLC

Mailing Address 8 N Woods Rd

City Calverton State NY Zip Code 11933

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14912

Amount of Each Receipt this Period
 250.00

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

Mailing Address 8 N Woods Rd

City Calverton State NY Zip Code 11933

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

Name of Employer Occupation
 Baiting Hollow Advisors LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14912.0

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]

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 Occupation
 Suffolk Cty Sheriff's Office Deputy Sheriff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 636.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.15078

Amount of Each Receipt this Period
 50.00

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

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

300.00

**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 123	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Richard Bauser		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2014
Mailing Address 19 Linda St		Transaction ID : SA11AI.14328
City Port Jefferson Station	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Requested Info---Sent Letter	Occupation Requested Info---Sent Letter	Election Cycle-to-Date 600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Christopher Beattie		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 74 Leonard Street		Transaction ID : SA11AI.14460
City Wading Rlver	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Tekmark	Occupation Computer Programmer	Election Cycle-to-Date 1750.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Dennis Becker		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 15 Swan River St.		Transaction ID : SA11AI.14210
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Marposs Corp.	Occupation Engineer	Election Cycle-to-Date 201.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 123
	<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) Bonnie Bellafiore		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 17-20 Whitestone Expwy Ste 403		Transaction ID : SA11AI.14076
City Whitestone	State NY	Zip Code 11357
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Requested Info---Letter Sent	Occupation Requested Info---Letter Sent	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Mark Biderman		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2014
Mailing Address 47 E.88th St		Transaction ID : SA11AI.12994
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00	
Name of Employer Biderman Associates	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Anthony Bonanno		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 17 Pondview		Transaction ID : SA11AI.14360
City St James	State NY	Zip Code 11780
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Suffolk Anesthesiology	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 13 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Frank Bongiorno

Mailing Address 222 Mansion Ave

City Staten Island State NY Zip Code 10308

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

Name of Employer Great Kills Harbor Occupation Fisherman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.14255

Amount of Each Receipt this Period
500.00

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

Mailing Address 297 Mill Hill Rd

City Mill Neck State NY Zip Code 11765

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

Name of Employer The Engel Burman Group 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
 10 / 20 / 2014

Transaction ID : SA11AI.13286

Amount of Each Receipt this Period
2600.00

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

Mailing Address 297 Mill Hill Rd

City Mill Neck State NY Zip Code 11765

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

Name of Employer The Engel Burman Group 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
 10 / 20 / 2014

Transaction ID : SA11AI.13284

Amount of Each Receipt this Period
2600.00

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 14 OF 123
	<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)
Scott Burman

Mailing Address 67 Clinton Road

City State Zip Code
Garden City NY 11530

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

Name of Employer Occupation
Engel Burman Group Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 07 / 2014

Transaction ID : SA11AI.14377

Amount of Each Receipt this Period
500.00

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

Mailing Address 43 Wolf Hollow Rd

City State Zip Code
Centereach NY 11720

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

Name of Employer Occupation
Campolo, Middleton & McCormick Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2014

Transaction ID : SA11AI.13094

Amount of Each Receipt this Period
1950.00

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

Mailing Address 66 Medford Ave.

City State Zip Code
Patchogue NY 11772

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.14438

Amount of Each Receipt this Period
250.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 123
	<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
1850.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.14282

Amount of Each Receipt this Period
500.00

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

Mailing Address 65 Hamilton Dr

City State Zip Code
Roslyn NY 11576

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

Name of Employer Occupation
Requested Info---Sent Letter Requested Info---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 Y Y
10 / 17 / 2014

Transaction ID : SA11AI.14465

Amount of Each Receipt this Period
500.00

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

Mailing Address 4 Hylser Ct

City State Zip Code
Coram NY 11727

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

Name of Employer Occupation
Douglas Elliman Real Estate Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
520.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.14412

Amount of Each Receipt this Period
100.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 6 North Wisconsin Ave

City Massapequa State NY Zip Code 11758

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.14442

Amount of Each Receipt this Period
500.00

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

Mailing Address 10405 Sandringham Ct

City Potomac State MD Zip Code 20854

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

Name of Employer Federal Health Counsel Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.14315

Amount of Each Receipt this Period
500.00

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

Mailing Address 11 Canterbury Ct

City Upper Saddle River State NJ Zip Code 07458

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

Name of Employer Eleven Canterbury LLC Occupation Managing Partner

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
 10 / 23 / 2014

Transaction ID : SA11AI.14136

Amount of Each Receipt this Period
250.00

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 17 OF 123
	<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
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14468

Amount of Each Receipt this Period
100.00

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

Mailing Address 13451 Oregon Rd

City Cutchogue State NY Zip Code 11935

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

Name of Employer Requested Info Occupation Requested Information
Retired 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
 10 / 20 / 2014

Transaction ID : SA11AI.13844

Amount of Each Receipt this Period
2000.00

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

Mailing Address 3049 Wilson Ave

City Wantagh State NY Zip Code 11793

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

Name of Employer Requested Info Occupation Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14448

Amount of Each Receipt this Period
250.00

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 123
	<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) Douglas Corwin		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2014
Mailing Address P.O. Box 500		Transaction ID : SA11AI.14205
City Aquebogue	State NY	Zip Code 11931
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Crescent Duck Farm	Occupation Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Courthouse Corporate Center LLC		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 377 Oak St Ste 110		Transaction ID : SA11AI.14088
City Garden City	State NY	Zip Code 11530
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Eric Ulrich		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 64-82 83rd St		Transaction ID : SA11AI.14088.0
City Middle Village	State NY	Zip Code 11379
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer New York City	Occupation Councilman	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Denis Cronin		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1295 Northern Blvd		Transaction ID : SA11AI.13759
City Manhasset	State NY	
Zip Code 11030		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Name of Employer Royalnest Corp
Occupation Business		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00

Full Name (Last, First, Middle Initial) Thomas Derby		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 106 Country Club Road		Transaction ID : SA11AI.14481
City Bellport	State NY	
Zip Code 11713		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Name of Employer Emerald Island Supply
Occupation Vice President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00

Full Name (Last, First, Middle Initial) Thomas Derby		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 106 Country Club Road		Transaction ID : SA11AI.14173
City Bellport	State NY	
Zip Code 11713		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Name of Employer Emerald Island Supply
Occupation Vice President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 99 Whippoorwill Lane

City East Quogue State NY Zip Code 11942

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

Name of Employer Ocean Electric Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.14048

Amount of Each Receipt this Period
1500.00

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

Mailing Address 2 Windsor Hill

City Saint James State NY Zip Code 11750-3908

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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.14333

Amount of Each Receipt this Period
200.00

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

Mailing Address 120 East 81st St

City New York State NY Zip Code 10021

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

Name of Employer Time Warner Inc Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.14226

Amount of Each Receipt this Period
500.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 123
	<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 Emrani		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 4333 Veterans Memorial Hwy		Transaction ID : SA11AI.14407
City Ronkonkoma	State NY	Zip Code 11779
FEC ID number of contributing federal political committee.	C	
Name of Employer Pride Products Corporation	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	
		Amount of Each Receipt this Period 500.00

Full Name (Last, First, Middle Initial) Mark Engel		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 1 Forest Dr		Transaction ID : SA11AI.13762
City Sands Point	State NY	Zip Code 11050
FEC ID number of contributing federal political committee.	C	
Name of Employer Langson Property Services Corp	Occupation Real estate	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	
		Amount of Each Receipt this Period 1000.00

Full Name (Last, First, Middle Initial) Matthew Engel		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 19 Soundview Lane		Transaction ID : SA11AI.13761
City Sands Point	State NY	Zip Code 11050
FEC ID number of contributing federal political committee.	C	
Name of Employer Langsam Property Services Corp	Occupation Real estate	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	
		Amount of Each Receipt this Period 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) Steven Engel		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 3817 Woodley Rd NW		Transaction ID : SA11AI.13763
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Dechert LLP	Occupation Lawyer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Dawn Eskew		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2014
Mailing Address 23 Alley Pond Ct		Transaction ID : SA11AI.14463
City Dix Hills	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Housewife	Occupation Housewife	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Angel Falcon		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 35 Sycora Lane		Transaction ID : SA11AI.14142
City Islandia	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Church	Occupation Senior Pastor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 23 OF 123
	<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)
Pamela Farino

Mailing Address 30 Summerset Drive

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
Self Employed Domestic Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.14179

Amount of Each Receipt this Period
100.00

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

Mailing Address 15 Industrial Blvd

City State Zip Code
Medford NY 11763

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

Name of Employer Occupation
Posimech Inc Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11AI.14184

Amount of Each Receipt this Period
500.00

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

Mailing Address 1 Brewster Court

City State Zip Code
Setauket NY 11733

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
1950.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.15044

Amount of Each Receipt this Period
250.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 123
	<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)
Todd Freund

Mailing Address **1 Brewster Court**

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

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
2250.00

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

Transaction ID : SA11AI.14488

Amount of Each Receipt this Period
300.00

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

Mailing Address **188 E 78th St**

City **New York** State **NY** Zip Code **10075**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.14924

Amount of Each Receipt this Period
400.00

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

Mailing Address **27 Corwell Avenue**

City **Riverhead** State **NY** Zip Code **11901**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
436.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.14174

Amount of Each Receipt this Period
14.00

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

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

714.00

**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 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Diane Glazer

Mailing Address 3818 Mansfield Dr

City State Zip Code
Seaford NY 11783

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

Name of Employer Occupation
Motorola Tech Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.14455

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 12

City State Zip Code
Middle Island NY 11953

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

Name of Employer Occupation
Just Kids 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
10 / 17 / 2014

Transaction ID : SA11AI.14471

Amount of Each Receipt this Period
500.00

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

Mailing Address 451 E 14th St 2C

City State Zip Code
New York NY 10009

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

Name of Employer Occupation
Requested Info---Sent Letter Requested Info---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
10 / 19 / 2014

Transaction ID : SA11AI.14443

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: (check only one)	PAGE 26 OF 123
	<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 Harkin

Mailing Address 611 Moriches Rd

City State Zip Code
Nissequoge NY 11780

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

Name of Employer Occupation
Busby Metals 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
10 / 23 / 2014

Transaction ID : SA11AI.14135

Amount of Each Receipt this Period
250.00

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

Mailing Address 94 Lake Avenue

City State Zip Code
Center Moriches NY 11934

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

Name of Employer Occupation
Stalco Construction Inc 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
10 / 31 / 2014

Transaction ID : SA11AI.14126

Amount of Each Receipt this Period
2600.00

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

Mailing Address 7 Snowdance Lane

City State Zip Code
Nesconset NY 11767

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
228.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.14431

Amount of Each Receipt this Period
50.00

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 27 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Alanson Haughton		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address P.O. Box 1257		Transaction ID : SA11AI.14224
City Sag Harbor	State NY	
Zip Code 11963		Amount of Each Receipt this Period 350.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Pitcainn Trust Co	Occupation Investment Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) B. Vanessa Herman		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 237 Middle Island Road		Transaction ID : SA11AI.14273
City Medford	State NY	
Zip Code 11763		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Pace University	Occupation Sent Request Letter	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1060.00	

Full Name (Last, First, Middle Initial) C. Todd Houslanger		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 7 Timber Lane		Transaction ID : SA11AI.14312
City Fort Salonga	State NY	
Zip Code 11768		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Houslanger & Associates, PLLC	Occupation Attorney at Law	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 264.00	

SUBTOTAL of Receipts This Page (optional).....	1100.00
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: PAGE 28 OF 123
(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)
William Hubbell

Mailing Address 300 S Biscayne Blvd #4006

City State Zip Code
Miami FL 33131

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

Name of Employer Occupation
Hale Hamm Investments Investor

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
 10 28 2014

Transaction ID : SA11AI.14069

Amount of Each Receipt this Period
1600.00

B. Full Name (Last, First, Middle Initial)
INVESTIGATIVE AND SECURITY PROFESSIONALS FOR LEGISLATIVE ACTION PAC

Mailing Address 235 NORTH PINE ST

City State Zip Code
LANSING MI 48933

FEC ID number of contributing federal political committee. **C** C00463786

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
 10 18 2014

Transaction ID : SA11AI.13097

Amount of Each Receipt this Period
2600.00

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

Mailing Address 47 Doral Lane

City State Zip Code
Bayshore NY 11706

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

Name of Employer Occupation
Self Employed--Letter Sent Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : SA11AI.14768

Amount of Each Receipt this Period
500.00

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

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

4700.00

**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 123	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Charles Joyce

Mailing Address 4165 Grandview

City State Zip Code
Wellsville NY 14895

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

Name of Employer Occupation
Otis Eastern Service Inc Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.13823

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
JS Hyundai Automotive LLC

Mailing Address 1815 Middle Country Rd

City State Zip Code
Centereach NY 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
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.14118

Amount of Each Receipt this Period
1500.00

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

Mailing Address 95 Smithtown Blvd

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
Regency Homes Developer/Builder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.14072

Amount of Each Receipt this Period
1000.00

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

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

5100.00

**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 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Nabil Kiridly

Mailing Address 267 E Main St Suite B3

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation
Nabil Kiridly M.D. Plastic Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.14358

Amount of Each Receipt this Period
250.00

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

Mailing Address 26 Van Buren Ave.

City State Zip Code
Centereach NY 11720

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
267.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.14265

Amount of Each Receipt this Period
14.00

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

Mailing Address 138-18 28th Rd
Apt 3B

City State Zip Code
Flushing NY 11354

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

Name of Employer Occupation
Langsam Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.14228

Amount of Each Receipt this Period
500.00

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

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

764.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 123
	<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)
Oren Lukatz

Mailing Address 410 So Rampant Blvd Suite 440

City LasVegas	State NV	Zip Code 89145
------------------	-------------	-------------------

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

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.14131

Amount of Each Receipt this Period
2600.00

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

Mailing Address 410 So Rampant Blvd Suite 440

City LasVegas	State NV	Zip Code 89145
------------------	-------------	-------------------

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

Name of Employer None	Occupation None
--------------------------	--------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.14129

Amount of Each Receipt this Period
2600.00

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

Mailing Address 7 Innis Avenue

City Ronkonkoma	State NY	Zip Code 11779
--------------------	-------------	-------------------

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
2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.14030

Amount of Each Receipt this Period
1500.00

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

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

6700.00

**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 123
	<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) Jackie Maloney		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2014
Mailing Address 108 Lynn Ave		Transaction ID : SA11AI.14191
City Hampton Bays	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Requested Info---Sent Letter	Occupation Requested Info---Sent Letter	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Jeanne Maloney		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2014
Mailing Address 108 Lynn Ave		Transaction ID : SA11AI.14036
City Hampton Bays	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Requested Info---Sent Letter	Occupation Requested Info---Sent Letter	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Timothy McCulley		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 51 Old Trail Rd		Transaction ID : SA11AI.14439
City Water Mill	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Law Office of Timothy McCulley	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 33 OF 123
	<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. Katherine McGreevy		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 800 Summit Dr		Transaction ID : SA11AI.14411	
City Mattituck	State NY	Zip Code 11952	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) B. James McInerney		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 60 West 57th Street Apt 3F		Transaction ID : SA11AI.14214	
City New York	State NY	Zip Code 10019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer JP Morgan Chase	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00		

Full Name (Last, First, Middle Initial) C. Anthony Milano		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 80 Maiden Lane		Transaction ID : SA11AI.14321	
City New York	State NY	Zip Code 10038	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Crown Advantage	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 33 Lourae Dr.

City: Massapequa State: NY Zip Code: 11762

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 650.00

Date of Receipt: 10 / 24 / 2014

Transaction ID : SA11AI.14424

Amount of Each Receipt this Period: 100.00

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

Mailing Address 256 Mill Rd

City: Westhampton Beach State: NY Zip Code: 11978

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

Name of Employer: Douglas Elliman Occupation: Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2528.00

Date of Receipt: 10 / 16 / 2014

Transaction ID : SA11AI.14371

Amount of Each Receipt this Period: 14.00

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

Mailing Address 10 Puritan Pl

City: Huntington State: NY Zip Code: 11743

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

Name of Employer: Mullahy & Associates Occupation: Nurse Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 450.00

Date of Receipt: 11 / 03 / 2014

Transaction ID : SA11AI.14340

Amount of Each Receipt this Period: 100.00

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

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

214.00

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

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

FOR LINE NUMBER: PAGE 35 OF 123
(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)
Tom Mulrooney

Mailing Address 7 Westbury Rd

City State Zip Code
Hampton Bays NY 11946

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11AI.14240

Amount of Each Receipt this Period
200.00

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
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11AI.14414

Amount of Each Receipt this Period
300.00

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

Mailing Address 3349 Park Ave

City State Zip Code
Wantagh NY 11793

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

Name of Employer Occupation
Murphy-Troy & Associates P.C. Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14453

Amount of Each Receipt this Period
250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 36 OF 123
(check only one)
 11a 11b 11c 11d 11e
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Justin Muzinich

Mailing Address 110 East 71st St

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Muzinich & Co Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.14336

Amount of Each Receipt this Period
500.00

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

Mailing Address 1 Penn Drive

City State Zip Code
Dix Hills NY 11746

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

Name of Employer Occupation
Requested Info Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14452

Amount of Each Receipt this Period
250.00

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

Mailing Address 4 Phyllis Dr Ste B

City State Zip Code
Patchogue NY 11772

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.14074

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Desmond O'Sullivan

Mailing Address 21 Waterview Dr

City State Zip Code
Port Jefferson NY 11777

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

Name of Employer Requested Info---Sent Letter
Occupation Requested Info---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
 10 / 24 / 2014

Transaction ID : SA11AI.14253

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Old Victoria House LLC

Mailing Address 750 Route 25A Ste 3

City State Zip Code
Setauket NY 11733

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

Name of Employer Requested Info---Sent Letter
Occupation Requested Info---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
 10 / 29 / 2014

Transaction ID : SA11AI.14484

Amount of Each Receipt this Period
500.00

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

Mailing Address Route 25A Woods Corner Rd

City State Zip Code
Setauket NY 11733

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

Name of Employer Requested Info---Sent Letter
Old Victoria House LLC
Occupation Requested Info---Sent Letter
Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.14484.0

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 123
	<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)
OORAH! POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 1053

City State Zip Code
BLOOMINGTON IN 47402

FEC ID number of contributing federal political committee. **C** C00551853

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
10 / 20 / 2014

Transaction ID : SA11AI.13846

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
P & B Automotive LLC

Mailing Address 193 Sunrise Highway

City State Zip Code
West Islip NY 11795

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
10 / 31 / 2014

Transaction ID : SA11AI.14114

Amount of Each Receipt this Period
1000.00

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

Mailing Address 5 Hornleaf Lane

City State Zip Code
Holbrook NY 11741

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

Name of Employer Occupation
Custom Design Contracting Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
340.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.14372

Amount of Each Receipt this Period
200.00

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

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

2200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 123
	<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)
Raymond Prochaska

Mailing Address 22 Wicks Rd

City State Zip Code
E Northport NY 11731

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11AI.14425

Amount of Each Receipt this Period
50.00

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

Mailing Address 27 West Haven Drive

City State Zip Code
East Northport NY 11731

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

Name of Employer Occupation
GEICO Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.14457

Amount of Each Receipt this Period
250.00

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

Mailing Address 118 Horseshoe Rd.

City State Zip Code
Mill Neck NY 11765-1004

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

Name of Employer Occupation
American Stock Exchange President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : SA11AI.13100

Amount of Each Receipt this Period
2600.00

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 123
	<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 Quit

Mailing Address 15 Randall Rd

City State Zip Code
Wading River NY 11792

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
214.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.14261

Amount of Each Receipt this Period
25.00

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

Mailing Address 41 Webster St

City State Zip Code
N.Merrick NY 11566

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

Name of Employer Occupation
Raiser & Kenniff Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.14285

Amount of Each Receipt this Period
500.00

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

Mailing Address 15 Greenwood Lane

City State Zip Code
St James NY 11780

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

Name of Employer Occupation
Requested Info---Sent Letter Requested Info---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
10 / 22 / 2014

Transaction ID : SA11AI.14155

Amount of Each Receipt this Period
500.00

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

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

1025.00

**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 123
	<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)
Julie Riccio

Mailing Address 4810 25th St N

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
PWC Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.14196

Amount of Each Receipt this Period
250.00

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

Mailing Address 122 Laburnum

City State Zip Code
San Antonio TX 78209

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

Name of Employer Occupation
Requested Info---Sent Letter Requested Info---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
 10 / 17 / 2014

Transaction ID : SA11AI.14427

Amount of Each Receipt this Period
500.00

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

Mailing Address 34 Boylan Lane

City State Zip Code
Blue Point NY 11715

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

Name of Employer Occupation
Requested Info--Sent Letter Requested Info--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
 10 / 26 / 2014

Transaction ID : SA11AI.14246

Amount of Each Receipt this Period
150.00

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 42 OF 123
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 64 Wood Ave

City State Zip Code
Amityville NY 11701

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

Name of Employer Occupation
Integrated Drywall Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11A1.14450

Amount of Each Receipt this Period
500.00

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

Mailing Address 2006 Lake End Rd

City State Zip Code
Merrick NY 11566

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

Name of Employer Occupation
Pryor Cashman LLP 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
 10 / 20 / 2014

Transaction ID : SA11A1.13755

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2006 Lake End Rd

City State Zip Code
Merrick NY 11566

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

Name of Employer Occupation
Pryor Cashman LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11A1.13757

Amount of Each Receipt this Period
1500.00

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 43 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Jacalyn Rose		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2006 Lake End Rd		Transaction ID : SA11AI.14101
City Merrick	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1400.00
Name of Employer Self Employed	Occupation Advertising	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1400.00	

Full Name (Last, First, Middle Initial) B. Stephen Schmidt		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 102 W Lakewood St		Transaction ID : SA11AI.14161
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Stephen Schmidt		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 102 W Lakewood St		Transaction ID : SA11AI.14262
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 123
	<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)
William Schoolman

Mailing Address 1600 Locust Ave

City Bohemia State NY Zip Code 11716

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

Name of Employer Schoolman Transportation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : SA11AI.14449

Amount of Each Receipt this Period
250.00

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

Mailing Address 18444 Via Di Regina

City Boca Raton State FL Zip Code 33496

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 **1754.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.14206

Amount of Each Receipt this Period
50.00

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 **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.14223

Amount of Each Receipt this Period
150.00

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

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

450.00

**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 45 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 31 Woodacres Rd

City State Zip Code
Brookville NY 11545

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.14341

Amount of Each Receipt this Period
500.00

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

Mailing Address 4815 Habersham Lane

City State Zip Code
Summerville SC 29485

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

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

Trident Real Estate Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.14186

Amount of Each Receipt this Period
250.00

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

Mailing Address 2114 Bradley Pond Rd

City State Zip Code
Ellenburg Center NY 12934

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

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

None None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.14104

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 123
	<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. Clifford Sobel		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 225 Millburn Ave		Transaction ID : SA11AI.14049	
City Milburn	State NJ	Zip Code 07041	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00	
Name of Employer Valor Capital Broup	Occupation Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. Marisa Sorrentino		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 100 Elliot Ave		Transaction ID : SA11AI.15066	
City Lake Grove	State NY	Zip Code 11755	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Evinlem Management	Occupation Archiver		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Charles Spies		Date of Receipt M M / D D / Y Y Y Y 11 / 02 / 2014	
Mailing Address 7406 Park Terrace Dr		Transaction ID : SA11AI.14324	
City Alexandria	State VA	Zip Code 22307	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Clark Hill PLLC	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	4100.00
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 47 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Kanwal Sra		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 7 Alley Pond Ct		Transaction ID : SA11AI.14461	
City Huntington Station	State NY	Zip Code 11746	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer Sra & Associates	Occupation Accountant		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. Wallace Steidle		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address PO Box 392		Transaction ID : SA11AI.15193	
City Watermill	State NY	Zip Code 11976	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer Self Employed	Occupation Fisherman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 275.00		

Full Name (Last, First, Middle Initial) C. Wallace Steidle		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address PO Box 392		Transaction ID : SA11AI.14410	
City Watermill	State NY	Zip Code 11976	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer Self Employed	Occupation Fisherman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 325.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 350.00
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: PAGE 48 OF 123
(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)
Edward Stein Jr.

Mailing Address 306 Orchid Drive

City State Zip Code
Mastic Beach NY 11951

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

Name of Employer Occupation
US Postal Service Letter Carrier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
303.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 17 2014

Transaction ID : SA11AI.14476

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Edward Stein Jr.

Mailing Address 306 Orchid Drive

City State Zip Code
Mastic Beach NY 11951

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

Name of Employer Occupation
US Postal Service Letter Carrier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
328.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 22 2014

Transaction ID : SA11AI.14172

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Edward Stein Jr.

Mailing Address 306 Orchid Drive

City State Zip Code
Mastic Beach NY 11951

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

Name of Employer Occupation
US Postal Service Letter Carrier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
353.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 2014

Transaction ID : SA11AI.14309

Amount of Each Receipt this Period
25.00

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

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

100.00

**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 49 OF 123
	<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)
Sunrise Automall LLC

Mailing Address 1391 Sunrise Highway

City Bayshore State NY Zip Code 11706

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.14112

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Tangel Engineering Associates PC

Mailing Address 285 Middle Country Rd Suite 208

City Smithtown State NY Zip Code 11787

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.14418

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
S.V. Tanguturi

Mailing Address 10 Poplar Lane

City Bayport State NY Zip Code 11705

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

Name of Employer Occupation
Satyanarayana V. Tanguturi M.D
Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.14356

Amount of Each Receipt this Period
250.00

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

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

1950.00

**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 50 OF 123
	<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)
Manoj Treman

Mailing Address 2544 Tonquen St

City State Zip Code
E.Meadow NY 11554

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.14250

Amount of Each Receipt this Period
250.00

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

Mailing Address 6 Hicks Lane

City State Zip Code
Old Westbury NY 11568

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

Name of Employer Occupation
Requested Info Requested Info

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.14473

Amount of Each Receipt this Period
150.00

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

Mailing Address 251 West 20th St

City State Zip Code
New York NY 10011

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

Name of Employer Occupation
Self Employed Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.14390

Amount of Each Receipt this Period
250.00

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 51 OF 123
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

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

Mailing Address 165 West End Ave Apt 20D

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Blank Rome LLP Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11AI.14277

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 664

City State Zip Code
Nesconset NY 11767

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

Name of Employer Occupation
Port Jeff Cesspool Service Inc Service Person

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
242.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.14212

Amount of Each Receipt this Period
14.00

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

Mailing Address P.O. Box 411

City State Zip Code
Sagaponack NY 11962

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

Name of Employer Occupation
UBS Financial Services Financial Advisors

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.14446

Amount of Each Receipt this Period
250.00

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

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

764.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 123
	<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)
Fred Zeidman

Mailing Address 3719 Olympia Dr

City Houston State TX Zip Code 77019

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

Name of Employer Requested Info---Sent Letter Occupation Requested Info---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
 10 / 31 / 2014

Transaction ID : SA11Al.14319

Amount of Each Receipt this Period
 250.00

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

Mailing Address 360 W Washington Avenue Apt # 1215

City Madison State WI Zip Code 53703

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

Name of Employer Requested Info---Sent Letter Occupation Requested Info---Sent Letter
 Epic Systems Corp Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11Al.14287

Amount of Each Receipt this Period
 150.00

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 Requested Info---Sent Letter 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).....

400.00

87181.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 123	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial)
Smithtown Conservatives For Victory

Mailing Address 181 Smithtown Blvd Ste 103

City Nesconset State NY Zip Code 11767

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
995.00

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

Transaction ID : SA11B.14898

Amount of Each Receipt this Period
995.00

Permissible Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

995.00

995.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 123
	<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)
ACPAC ACA International

Mailing Address 509 2nd Street NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00034785**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11C.14897

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1111 STEWART AVENUE

City BETHPAGE State NY Zip Code 11714

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C.14065

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE
ATTN: 19050-1204

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00326595**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11C.14106

Amount of Each Receipt this Period
4000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 123
	<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)
CMR POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00469429

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11C.14012

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
COLLINS FOR CONGRESS

Mailing Address PO BOX 1295

City Gainesville State GA Zip Code 30503

FEC ID number of contributing federal political committee. **C** C00502039

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
859.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11C.15352

Amount of Each Receipt this Period
859.06

In-kind - Fund raiser travel expenses

C. Full Name (Last, First, Middle Initial)
DEEDS NOT WORDS POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 94478

City Oklahoma City State OK Zip Code 73143

FEC ID number of contributing federal political committee. **C** C00569293

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
 10 / 31 / 2014

Transaction ID : SA11C.14507

Amount of Each Receipt this Period
1000.00

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

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

3859.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 123
	<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)
DOUG LAMALFA COMMITTEE

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

FEC ID number of contributing federal political committee. **C** C00509422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11C.14041

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FIRST IN FREEDOM PAC

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00540146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11C.14045

Amount of Each Receipt this Period
2600.00

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

Mailing Address P.O. Box 2

City St James State NY Zip Code 11780

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11C.15296

Amount of Each Receipt this Period
250.00

Permissible Funds

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 57 OF 123
	<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. FUND FOR AMERICAN OPPORTUNITY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 65796

City WASHINGTON State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C C00336297**

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
 10 / 31 / 2014

Transaction ID : SA11C.14110

Amount of Each Receipt this Period
 1000.00

B. GARY PALMER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 1919 OXMOOR RD #235

City HOMEWOOD State AL Zip Code 35209

FEC ID number of contributing federal political committee. **C C00551374**

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
 10 / 29 / 2014

Transaction ID : SA11C.14086

Amount of Each Receipt this Period
 1000.00

C. GEORGE HOLDING FOR CONGRESS INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 97187

City RALEIGH State NC Zip Code 27624

FEC ID number of contributing federal political committee. **C C00499236**

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
 10 / 31 / 2014

Transaction ID : SA11C.14505

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 58 OF 123
	<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. GREATER TOMORROW POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 600 PENNSYLVANIA AVENUE SE STE 330

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00526715

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
 10 / 27 / 2014

Transaction ID : SA11C.14038

Amount of Each Receipt this Period
 1000.00

B. HSP Direct

Full Name (Last, First, Middle Initial)
Mailing Address 13755 Sunrise Valley Dr Suite 450

City Herndon State VA Zip Code 20171

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
 10 / 26 / 2014

Transaction ID : SA11C.14024

Amount of Each Receipt this Period
 2600.00

C. ICE PAC

Full Name (Last, First, Middle Initial)
Mailing Address 9158 E Staring Lane

City Eden Prairie State MN Zip Code 55347

FEC ID number of contributing federal political committee. **C** C00484667

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
 10 / 27 / 2014

Transaction ID : SA11C.14040

Amount of Each Receipt this Period
 2000.00

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

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

5600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 123
	<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)
InsurPAC

Mailing Address 20 F Street NW Ste 610

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : SA11C.14068

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
John Ratcliffe For Congress

Mailing Address 2931 Ridge Rd Ste 101-217

City Rockwall State TX Zip Code 75032

FEC ID number of contributing federal political committee. **C C00554113**

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
 10 / 27 / 2014

Transaction ID : SA11C.14026

Amount of Each Receipt this Period
1000.00

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

Mailing Address PO BOX 1441

City TOPEKA State KS Zip Code 66601

FEC ID number of contributing federal political committee. **C C00433730**

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
 10 / 27 / 2014

Transaction ID : SA11C.14028

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 123
	<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)
MR. SOUTHERN MISSOURIAN IN THE HOUSE PAC

Mailing Address **PO BOX 30844**

City **BETHESDA** State **MD** Zip Code **20824**

FEC ID number of contributing federal political committee. **C C00563726**

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
10 / 27 / 2014

Transaction ID : SA11C.14044

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
NATIONAL FUEL GAS COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **6363 MAIN STREET**

City **WILLIAMSVILLE** State **NY** Zip Code **14221**

FEC ID number of contributing federal political committee. **C C00083758**

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
10 / 29 / 2014

Transaction ID : SA11C.14084

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address **5211 PORT ROYAL ROAD SUITE 500**

City **SPRINGFIELD** State **VA** Zip Code **22151**

FEC ID number of contributing federal political committee. **C C00358051**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : SA11C.14016

Amount of Each Receipt this Period
5000.00

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

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

8600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 123
	<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)
NEW YORK MAJORITY FUND 2014

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00566216

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
 10 / 29 / 2014

Transaction ID : SA11C.14094

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City SUGAR LAND State TX Zip Code 77496

FEC ID number of contributing federal political committee. **C** C00437913

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
 11 / 03 / 2014

Transaction ID : SA11C.14900

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
PATRIOT VOICES PAC

Mailing Address 315 FOXTAIL LANE

City SPRING CITY State PA Zip Code 19475

FEC ID number of contributing federal political committee. **C** C00528307

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
 10 / 30 / 2014

Transaction ID : SA11C.14098

Amount of Each Receipt this Period
 1000.00

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

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

4600.00

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

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

FOR LINE NUMBER: PAGE 62 OF 123
(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. People for Enterprise Trade & Economic Growth
 Full Name (Last, First, Middle Initial)
 Mailing Address 7804 Evening Lane
 City State Zip Code
 Alexandria VA 22306
 FEC ID number of contributing federal political committee. **C** C00363770
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2014
Transaction ID : SA11C.14013
 Amount of Each Receipt this Period
 3000.00

B. Portuguese American PAC Inc
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 Horseblock Rd
 City State Zip Code
 Farmingville NY 11738
 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
 11 / 03 / 2014
Transaction ID : SA11C.15263
 Amount of Each Receipt this Period
 1000.00

C. RENEW AMERICA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 LEHIGH COURT
 City State Zip Code
 ROCKVILLE CENTRE NY 11570
 FEC ID number of contributing federal political committee. **C** C00290098
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11C.14064
 Amount of Each Receipt this Period
 2500.00

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

6500.00

**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 63 OF 123
	<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)
REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address **P. O. BOX 718**

City **WINSTON-SALEM** State **NC** Zip Code **27102**

FEC ID number of contributing federal political committee. **C C00042002**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11C.14051

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
The Good Fund

Mailing Address **P.O. Box 3404**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11C.14047

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
UTC Employee Political Action Committee

Mailing Address **No street address on check**

City **Hartford** State **CT** Zip Code **06101**

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

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

Transaction ID : SA11C.14902

Amount of Each Receipt this Period
2500.00
 2014 General Debt

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

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

6500.00

54509.06

**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 123			
	<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. Advantage Direct		M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2300 Clarendon Blvd Ste 303		Amount of Each Disbursement this Period
City Arlington	State VA	Zip Code 22201
Purpose of Disbursement Voter ID's	Category/ Type	
Candidate Name Zeldin For Congress	004	
Office Sought: <input checked="" 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: NY District: 01		
		Transaction ID : SB17.14533

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Advantage Direct		M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2300 Clarendon Blvd Ste 303		Amount of Each Disbursement this Period
City Arlington	State VA	Zip Code 22201
Purpose of Disbursement Voter ID's	Category/ Type	
Candidate Name Zeldin For Congress	005	
Office Sought: <input checked="" 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: NY District: 01		
		Transaction ID : SB17.14543

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Alitalia Pizza		M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 532 Montauk Highway		Amount of Each Disbursement this Period
City Center Moriches	State NY	Zip Code 11934
Purpose of Disbursement Pizza for Volunteers	Category/ Type	
Candidate Name Zeldin For Congress	001	
Office Sought: <input checked="" 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: NY District: 01		
		Transaction ID : SB17.14580

SUBTOTAL of Disbursements This Page (optional).....	16011.48
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 65 OF 123		
	<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 11 / 20 / 2014
Mailing Address 532 Montauk Highway		Amount of Each Disbursement this Period 383.45 Transaction ID : SB17.14892
City Center Moriches	State NY	
Purpose of Disbursement Bill Paid at Pizza Place for Volunteer Food		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Eric Amidon		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 7 Meadowgrass Lane		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.14551
City Southampton	State NY	
Purpose of Disbursement 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Erin Amidon		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 7 Meadowgrass Lane		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.14571
City Southampton	State NY	
Purpose of Disbursement Political Director		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	15383.45
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 123	
	<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. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 555 Hilton Ave Ste 106		Amount of Each Disbursement this Period 1771.34 Transaction ID : SB17.15345
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Credit Card Fees on donations	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 type="checkbox"/> Primary <input checked="" 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 10 / 16 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 41402.34 Transaction ID : SB17.14676
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buy	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 type="checkbox"/> Primary <input checked="" 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 10 / 20 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 15214.33 Transaction ID : SB17.14679
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buy	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	58388.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 123		
	<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 10 / 22 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 19883.00 Transaction ID : SB17.14688
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buy	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 type="checkbox"/> Primary <input checked="" 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 10 / 22 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 39000.00 Transaction ID : SB17.14689
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buy	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 type="checkbox"/> Primary <input checked="" 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 10 / 24 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 104000.00 Transaction ID : SB17.14692
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buys	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	162883.00
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 68 OF 123
	<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 11 / 03 / 2014
Mailing Address 1218 Grandview Avenue		Amount of Each Disbursement this Period 6069.00 Transaction ID : SB17.14707
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Buys	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. Cablevision		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1111 Stewart Ave		Amount of Each Disbursement this Period 109.95 Transaction ID : SB17.14528
City Bethpage	State NY	
Zip Code 11714	Purpose of Disbursement Internet/Phone	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 142.30 Transaction ID : SB17.14525
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	6321.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 7987.69 Transaction ID : SB17.14568
City Shirley State NY Zip Code 11967	Purpose of Disbursement Print/Postage/Mail 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 1538.81 Transaction ID : SB17.14685
City Shirley State NY Zip Code 11967	Purpose of Disbursement Postage 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 306.10 Transaction ID : SB17.14686
City Shirley State NY Zip Code 11967	Purpose of Disbursement Postage 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	9832.60
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 70 OF 123			
	<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 10 / 21 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley State NY Zip Code 11967 Purpose of Disbursement Postage		92.08 Transaction ID : SB17.14687	
Candidate Name Zeldin For Congress		Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<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 10 / 23 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley State NY Zip Code 11967 Purpose of Disbursement Lawn Signs		6623.70 Transaction ID : SB17.14550	
Candidate Name Zeldin For Congress		Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<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 10 / 30 / 2014	
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period	
City Shirley State NY Zip Code 11967 Purpose of Disbursement Radio Ad		200.00 Transaction ID : SB17.14558	
Candidate Name Zeldin For Congress		Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014		
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)		
State: NY District: 01			

SUBTOTAL of Disbursements This Page (optional).....	6915.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 123		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Campaigns Unlimited		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB17.14561
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Finance 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 type="checkbox"/> Primary <input checked="" 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 10 / 24 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 2800.00 Transaction ID : SB17.14562
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Social Media Consultant	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. Castle Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.14699
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Social Media Consultant	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	13800.00
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 123	
	<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. Citgo Lake Grove		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2691 Middle Country Rd		Amount of Each Disbursement this Period 921.67 Transaction ID : SB17.14715
City Lake Grove	State NY	
Zip Code 11755	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 type="checkbox"/> Primary <input checked="" 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 10 / 21 / 2014
Mailing Address 1593 Spring Hill rd Suite 400		Amount of Each Disbursement this Period 7.60 Transaction ID : SB17.14684
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) C. COLLINS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address PO BOX 1295		Amount of Each Disbursement this Period 859.06 Transaction ID : SB17.15354
City GAINESVILLE	State GA	
Zip Code 30503	Purpose of Disbursement In-kind - Fund raiser travel expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	921.67
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 73 OF 123			
	<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. Colortree Group Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 8000 Villa Park Dr		Amount of Each Disbursement this Period 2104.65 Transaction ID : SB17.15275
City Richmond	State VA Zip Code 23228	
Purpose of Disbursement 2014 General Expense---Printing and Mailshop		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Connoisseur Media Long Island		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 234 Airport Plaza Ste 5		Amount of Each Disbursement this Period 4500.00 Transaction ID : SB17.14515
City Farmingdale	State NY Zip Code 11735	
Purpose of Disbursement Radio Buy		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Corporate Press Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 9700 Philadelphia Ct		Amount of Each Disbursement this Period 200.37 Transaction ID : SB17.15277
City Lanham	State MD Zip Code 20706	
Purpose of Disbursement 2014 General Expense---Printing and Mailshop		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	6805.02
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 123	
	<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. Jennifer Disiena		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 22 Pine Dr		Amount of Each Disbursement this Period 1530.00 Transaction ID : SB17.14555
City Woodbury	State NY	
Zip Code 11797	Purpose of Disbursement Research Services	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. DonorBureau		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 1900 N Culpeper St		Amount of Each Disbursement this Period 399.08 Transaction ID : SB17.15279
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement 2014 General Expense--Statistical Modeling	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. Eastern American Data		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address P.O Box 8043		Amount of Each Disbursement this Period 653.92 Transaction ID : SB17.14531
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement Copier Rental	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2583.00
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 123			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. East Hampton Independent News Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 74 Montauk Hwy Ste 16		Amount of Each Disbursement this Period 1050.00 Transaction ID : SB17.14678
City East Hampton	State NY	
Zip Code 11937	Purpose of Disbursement Newspaper Ads	Category/ Type 004
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. James Emanuele		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 207 Gibbs Pond Road		Amount of Each Disbursement this Period 270.42 Transaction ID : SB17.14638
City Nesconset	State NY	
Zip Code 11767	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. James Emanuele		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 207 Gibbs Pond Road		Amount of Each Disbursement this Period 182.89 Transaction ID : SB17.14628
City Nesconset	State NY	
Zip Code 11767	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1503.31
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 123	
	<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. Lake Grove Mart		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 3089 Middle Country Rd		Amount of Each Disbursement this Period 50.44
City Lake Grove	State NY	Zip Code 11755
Purpose of Disbursement Gas on 10/08/2014	Category/ Type 002	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14628.2	
Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Fed Ex Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 27.69
City Bohemia	State NY	Zip Code 11716
Purpose of Disbursement Fed Ex Overnight Package	Category/ Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14680	
Office Sought: <input checked="" 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: NY District: 01		

Full Name (Last, First, Middle Initial) c. Fed Ex Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 27.69
City Bohemia	State NY	Zip Code 11716
Purpose of Disbursement Fed Ex Overnight Package	Category/ Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14690	
Office Sought: <input checked="" 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: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	55.38
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 77 OF 123			
	<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. Fed Ex Office		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 32.05 Transaction ID : SB17.14694
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Fed Ex Overnight Package 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Fed Ex Office		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 27.69 Transaction ID : SB17.14711
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Fed Ex overnight package 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. GMG Printing & Marketing		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1086.72 Transaction ID : SB17.14547
City Shirley State NY Zip Code 11967	Purpose of Disbursement Postage 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1146.46
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 78 OF 123			
	<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 10 / 23 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1811.06 Transaction ID : SB17.14548
City Shirley	State NY	
Purpose of Disbursement Postage	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 type="checkbox"/> Primary <input checked="" 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 10 / 23 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1746.00 Transaction ID : SB17.14549
City Shirley	State NY	
Purpose of Disbursement Postage	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. GMG Printing & Marketing		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 490.00 Transaction ID : SB17.14520
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	4047.06
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 79 OF 123		
	<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 10 / 28 / 2014
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 999.99 793.27
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Mailing	Transaction ID : SB17.14522
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) B. Philip Goglas II		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 39 Oak St		Amount of Each Disbursement this Period 999.99 132.66
City Central Islip	State NY	
Zip Code 11722	Purpose of Disbursement Reimbursement Check	Transaction ID : SB17.14731
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) c. Citgo Shirley		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 999.99 55.00
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Gas on 10/05/2014	Transaction ID : SB17.14731.0 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	999.99 925.93
TOTAL This Period (last page this line number only).....	999.99

**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 123	
	<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. Citgo Lake Grove		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2691 Middle Country Rd		Amount of Each Disbursement this Period 31.33
City Lake Grove	State NY	Zip Code 11755
Purpose of Disbursement Gas on 10/10/2014	Category/Type 002	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14731.3	
Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Philip Goglas II		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 39 Oak St		Amount of Each Disbursement this Period 900.00
City Central Islip	State NY	Zip Code 11722
Purpose of Disbursement Volunteer Coordinator	Category/Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14557	
Office Sought: <input checked="" 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: NY District: 01		

Full Name (Last, First, Middle Initial) c. Philip Goglas II		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 39 Oak St		Amount of Each Disbursement this Period 131.38
City Central Islip	State NY	Zip Code 11722
Purpose of Disbursement Expense Reimbursement	Category/Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14591	
Office Sought: <input checked="" 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: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1031.38
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 81 OF 123	
	<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. Philip Goglas II		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 39 Oak St		Amount of Each Disbursement this Period 1092.00 Transaction ID : SB17.14599
City Central Islip State NY Zip Code 11722	Purpose of Disbursement Volunteer Coordinator 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) B. Belinda Groneman		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 1213.86 Transaction ID : SB17.14675
City East Islip State NY Zip Code 11730	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 State: NY District: 01	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) c. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 76.45 Transaction ID : SB17.14675.0 [MEMO ITEM]
City Islip State NY Zip Code 11751	Purpose of Disbursement Gas on 10/09/2014 Category/Type 002	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....	2305.86
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 82 OF 123	
	<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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 34.01
City Islip	State NY	
Purpose of Disbursement Gas on 10/07/2014		Transaction ID : SB17.14675.1 [MEMO ITEM]
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 002
State: NY	District: 01	

Full Name (Last, First, Middle Initial) B. Dunkin Donuts East Islip		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 300 East Main St		Amount of Each Disbursement this Period 12.28
City East Islip	State NY	
Purpose of Disbursement Coffee for the Office on 10/14/2014		Transaction ID : SB17.14675.6 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 43.00
City Islip	State NY	
Purpose of Disbursement Gas on 10/01/2014		Transaction ID : SB17.14675.7 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 002
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 83 OF 123	
	<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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 66.00
City Islip	State NY	
Purpose of Disbursement Gas on 10/03/2014		Transaction ID : SB17.14675.8 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 002
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 10 / 16 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 243.31
City East Islip	State NY	
Purpose of Disbursement Supplies for Centereach Office on 10/15/2014		Transaction ID : SB17.14675.9 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: NY	District: 01	

Full Name (Last, First, Middle Initial) c. Dunkin Donuts East Islip		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 300 East Main St		Amount of Each Disbursement this Period 22.14
City East Islip	State NY	
Purpose of Disbursement Coffee for Office on 10/01/2014		Transaction ID : SB17.14675.12 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
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 84 OF 123	
	<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. The Groneman Group Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 124 Dock Rd		Amount of Each Disbursement this Period 180.00
City East Islip	State NY Zip Code 11730	
Purpose of Disbursement Security for Event on 10/05/2014	Category/Type 001	Transaction ID : SB17.14675.14 [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 type="checkbox"/> Primary <input checked="" 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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 74.00
City Islip	State NY Zip Code 11751	
Purpose of Disbursement Gas on 10/11/2014	Category/Type 002	Transaction ID : SB17.14675.17 [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 type="checkbox"/> Primary <input checked="" 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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 78.00
City Islip	State NY Zip Code 11751	
Purpose of Disbursement Gas on 10/13/2014	Category/Type 002	Transaction ID : SB17.14675.18 [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 type="checkbox"/> Primary <input checked="" 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 85 OF 123			
	<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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 78.00
City Islip	State NY	
Purpose of Disbursement Gas bought on 10/05/2014		Transaction ID : SB17.14675.19 [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 type="checkbox"/> Primary <input checked="" 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 10 / 16 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 66.00
City Islip	State NY	
Purpose of Disbursement Gas bought on 10/10/2014		Transaction ID : SB17.14675.20 [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 type="checkbox"/> Primary <input checked="" 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 10 / 24 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 1013.74
City East Islip	State NY	
Purpose of Disbursement Expense Reimbursement for the offices		Transaction ID : SB17.14613
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" 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: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1013.74
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 123	
	<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. Costco		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 125 Beacon Dr		Amount of Each Disbursement this Period 365.41
City Holbrook	State NY	
Purpose of Disbursement Office Supplies for Headquarters on 10/02/2014		Transaction ID : SB17.14613.0 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: NY	District: 01	

Full Name (Last, First, Middle Initial) B. King Kullen		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 552 Montauk Highway		Amount of Each Disbursement this Period 65.51
City Center Moriches	State NY	
Purpose of Disbursement Office Supplies for Center Moriches Office on 10/2/2014		Transaction ID : SB17.14613.1 [MEMO ITEM]
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
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 10 / 24 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 68.64
City Islip	State NY	
Purpose of Disbursement Gas reimbursement for 10/02/2014		Transaction ID : SB17.14613.2 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 002
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 87 OF 123			
	<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. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 46.55
City Centereach	State NY Zip Code 11720	
Purpose of Disbursement Lunch For Volunteers on 10/2/2014		Transaction ID : SB17.14613.3
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" 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)	[MEMO ITEM]
State: NY District: 01	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 161 Centereach Mall		Amount of Each Disbursement this Period 22.74
City Centereach	State NY Zip Code 11720	
Purpose of Disbursement Office Supplies for Centereach Office on 10/04/2014		Transaction ID : SB17.14613.4
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" 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)	[MEMO ITEM]
State: NY District: 01	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 31.30
City Centereach	State NY Zip Code 11720	
Purpose of Disbursement Lunch For Volunteers on 10/08/2014		Transaction ID : SB17.14613.6
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" 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)	[MEMO ITEM]
State: NY District: 01	Category/Type 001	

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 88 OF 123			
	<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 10 / 24 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 70.25
City Islip	State NY	Zip Code 11751
Purpose of Disbursement Gas on 10/09/2014	Category/ Type 002	Transaction ID : SB17.14613.7
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 23.80
City Centereach	State NY	Zip Code 11720
Purpose of Disbursement Lunch For Volunteers on 10/10/2014	Category/ Type 001	Transaction ID : SB17.14613.8
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Staples Stony Brook		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 187.90
City Stony Brook	State NY	Zip Code 11790
Purpose of Disbursement Electronic Notebook for Headquarters on 10/16/2014	Category/ Type 001	Transaction ID : SB17.14613.11
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 123		
	<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 M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 161 Centereach Mall		Amount of Each Disbursement this Period 40.93
City Centereach	State NY	
Zip Code 11720	Purpose of Disbursement Office Supplies for Centereach Office on 10/14/2014	[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 type="checkbox"/> Primary <input checked="" 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 10 / 24 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 38.80
City Islip	State NY	
Zip Code 11751	Purpose of Disbursement Gas on 10/15/2014	[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 type="checkbox"/> Primary <input checked="" 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 11 / 19 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 995.80
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Expense Reimbursement	[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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	995.80
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 90 OF 123	
	<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. King Kullen		Date of Disbursement MM / DD / YYYY 11 / 04 / 2014
Mailing Address 552 Montauk Highway		Amount of Each Disbursement this Period 40.08
City Center Moriches	State NY	Zip Code 11934
Purpose of Disbursement Food For Election Day	Category/Type 001	Transaction ID : SB17.14848.6
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. New York Husco		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 55.01
City Islip	State NY	Zip Code 11751
Purpose of Disbursement Gas	Category/Type 002	Transaction ID : SB17.14848.8
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Walmart		Date of Disbursement MM / DD / YYYY 10 / 27 / 2014
Mailing Address 161 Centereach Mall		Amount of Each Disbursement this Period 31.48
City Centereach	State NY	Zip Code 11720
Purpose of Disbursement Snacks for Volunteers	Category/Type 001	Transaction ID : SB17.14848.9
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY	District: 01	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 91 OF 123	
	<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 M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 161 Centereach Mall		Amount of Each Disbursement this Period 38.74
City Centereach	State NY	
Zip Code 11720	Purpose of Disbursement Supplies for Centereach Office	Transaction ID : SB17.14848.10 [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 type="checkbox"/> Primary <input checked="" 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 11 / 01 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 79.00
City Islip	State NY	
Zip Code 11751	Purpose of Disbursement Gas	Transaction ID : SB17.14848.12 [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 type="checkbox"/> Primary <input checked="" 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 11 / 19 / 2014
Mailing Address 124 Dock Rd.		Amount of Each Disbursement this Period 671.24
City East Islip	State NY	
Zip Code 11730	Purpose of Disbursement Expense Reimbursement	Transaction ID : SB17.14870
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	671.24
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 123	
	<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 10 / 31 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 72.00
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.14870.0 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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. New York Husco		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 736 Main St		Amount of Each Disbursement this Period 50.51
City Islip	State NY	
Purpose of Disbursement Gas	Category/ Type 002	Transaction ID : SB17.14870.1 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 15.19
City Centereach	State NY	
Purpose of Disbursement Food For Volunteers	Category/ Type 001	Transaction ID : SB17.14870.3 [MEMO ITEM]
Candidate Name Zeldin For Congress	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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 93 OF 123			
	<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. Bed Bath & Beyond		Date of Disbursement MM / DD / YYYY 10 / 19 / 2014
Mailing Address 5131 Sunrise Highway		Amount of Each Disbursement this Period 152.13
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Merchandise for Fundraiser	Transaction ID : SB17.14870.5
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 type="checkbox"/> Primary <input checked="" 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 10 / 08 / 2014
Mailing Address 2650-1 Sunrise Highway		Amount of Each Disbursement this Period 27.08
City East Islip State NY Zip Code 11730	Purpose of Disbursement Office Supplies	Transaction ID : SB17.14870.7
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Dunkin Donuts East Islip		Date of Disbursement MM / DD / YYYY 10 / 17 / 2014
Mailing Address 300 East Main St		Amount of Each Disbursement this Period 19.98
City East Islip State NY Zip Code 11751	Purpose of Disbursement Coffee for the Office	Transaction ID : SB17.14870.8
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 type="checkbox"/> Primary <input checked="" 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 94 OF 123	
	<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. Dunkin Donuts East Islip		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 300 East Main St		Amount of Each Disbursement this Period 25.97
City East Islip	State NY	Zip Code 11751
Purpose of Disbursement Donuts for Volunteers	Category/Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14870.9	
Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Dunkin Donuts East Islip		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 300 East Main St		Amount of Each Disbursement this Period 7.61
City East Islip	State NY	Zip Code 11751
Purpose of Disbursement Munchkins for Volunteers	Category/Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14870.10	
Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 19.36
City Centereach	State NY	Zip Code 11720
Purpose of Disbursement Lunch For Volunteers	Category/Type 001	
Candidate Name Zeldin For Congress	Transaction ID : SB17.14870.12	
Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 123	
	<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. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.14870.13
City Centereach State NY Zip Code 11720	Purpose of Disbursement Lunch 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	[MEMO ITEM]
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 34.21 Transaction ID : SB17.14870.14
City Centereach State NY Zip Code 11720	Purpose of Disbursement Lunch 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	[MEMO ITEM]
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Hess Farmingville		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1801 N.Ocean Ave		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.14703
City Farmingville State NY Zip Code 11763	Purpose of Disbursement Gas Cards for Interns and Drivers 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	375.00
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 96 OF 123			
	<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. JPA Studio		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 48 Birchwood Rd		Amount of Each Disbursement this Period 211.72 Transaction ID : SB17.14738
City Coram	State NY	
Purpose of Disbursement Photography Services		Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 01	

Full Name (Last, First, Middle Initial) B. JVC Broadcasting		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 3075 Veterans Memorial Highway Ste 201		Amount of Each Disbursement this Period 2990.00 Transaction ID : SB17.14572
City Ronkonkoma	State NY	
Purpose of Disbursement Radio Air Time		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 01	

Full Name (Last, First, Middle Initial) c. Lawrence Scott Events		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 35 Bethpage Rd		Amount of Each Disbursement this Period 5119.97 Transaction ID : SB17.14537
City Hicksville	State NY	
Purpose of Disbursement Catering for Fundraiser		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	8321.69
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 123		
	<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. Long Island Advance		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P.O. Box 780		Amount of Each Disbursement this Period 495.00 Transaction ID : SB17.14559
City Patchogue	State NY	
Zip Code 11772	Purpose of Disbursement Journal Ad	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. Long Island Advance		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address P.O. Box 780		Amount of Each Disbursement this Period 495.00 Transaction ID : SB17.14841
City Patchogue	State NY	
Zip Code 11772	Purpose of Disbursement Full Page Ad	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. Majority Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 135 Professional Drive Suite 104		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.14532
City Ponte Vedra Beach	State FL	
Zip Code 32082	Purpose of Disbursement Mail Pieces	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	3490.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 123		
	<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. Terri Malloy		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 60 Lou Ave		Amount of Each Disbursement this Period 294.87 Transaction ID : SB17.14660
City Kings Park State NY Zip Code 11754	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 State: NY District: 01	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Terri Malloy		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 60 Lou Ave		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.14567
City Kings Park State NY Zip Code 11754	Purpose of Disbursement Headquarters Coordinator 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. Terri Malloy		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 60 Lou Ave		Amount of Each Disbursement this Period 34.75 Transaction ID : SB17.14588
City Kings Park State NY Zip Code 11754	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 State: NY District: 01	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1329.62
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 99 OF 123	
	<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. Buona Sera Ristorante		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 88 E.Main St		Amount of Each Disbursement this Period 34.75
City Smithtown	State NY	Zip Code 11787
Purpose of Disbursement Lunch for Volunteers bought on 10/11/2014	Category/ Type 001	Transaction ID : SB17.14588.0
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Terri Malloy		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 60 Lou Ave		Amount of Each Disbursement this Period 490.00
City Kings Park	State NY	Zip Code 11754
Purpose of Disbursement Expense Reimbursement	Category/ Type 001	Transaction ID : SB17.14845
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address Smithtown		Amount of Each Disbursement this Period 490.00
City Smithtown	State NY	Zip Code 11787
Purpose of Disbursement Stamps	Category/ Type 004	Transaction ID : SB17.14845.0
Candidate Name Zeldin For Congress	Office Sought: <input checked="" 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: NY District: 01	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	490.00
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 100 OF 123	
	<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. Terri Malloy		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 60 Lou Ave		Amount of Each Disbursement this Period 289.49 Transaction ID : SB17.14821
City Kings Park State NY Zip Code 11754	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Buona Sera Ristorante		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 88 E.Main St		Amount of Each Disbursement this Period 38.20 Transaction ID : SB17.14821.1
City Smithtown State NY Zip Code 11787	Purpose of Disbursement Lunch 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	[MEMO ITEM]
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Buona Sera Ristorante		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 88 E.Main St		Amount of Each Disbursement this Period 39.60 Transaction ID : SB17.14821.3
City Smithtown State NY Zip Code 11787	Purpose of Disbursement Lunch 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	[MEMO ITEM]
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	289.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 123	
	<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. Buona Sera Ristorante		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 88 E.Main St		Amount of Each Disbursement this Period 30.40
City Smithtown	State NY	
Zip Code 11787	Purpose of Disbursement Lunch For Volunteers	Transaction ID : SB17.14821.4 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Buona Sera Ristorante		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 88 E.Main St		Amount of Each Disbursement this Period 60.75
City Smithtown	State NY	
Zip Code 11787	Purpose of Disbursement Lunch For Volunteers	Transaction ID : SB17.14821.5 [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Nancy Marks		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 4000.00
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Financial Consulting	Transaction ID : SB17.14552
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 102 OF 123	
	<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. Marie Masters		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 6 Lark Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.15293
City Centereach	State NY	
Purpose of Disbursement Volunteer Coordinator	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) B. Marie Masters		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 6 Lark Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.15291
City Centereach	State NY	
Purpose of Disbursement Volunteer Coordinator	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) c. Gene Nally		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 107 San Juan Drive		Amount of Each Disbursement this Period 211.19 Transaction ID : SB17.14600
City Hauppauge	State NY	
Purpose of Disbursement Expense Reimbursement	001	Category/ Type
Candidate Name Zeldin For Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1211.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 123	
	<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. Nova List		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 13755 Sunrise Valley Dr Suite 450		Amount of Each Disbursement this Period 5040.00 Transaction ID : SB17.15272
City Herndon	State VA Zip Code 20171	
Purpose of Disbursement List Rental & Maintenance	Category/Type 001	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. Oorbeek Morehouse Strategies, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 5614 Garnetts Farm Drive		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.14536
City Haymarket	State VA Zip Code 20169	
Purpose of Disbursement Fundraising 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 type="checkbox"/> Primary <input checked="" 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 10 / 31 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 9750.00 Transaction ID : SB17.14513
City Bohemia	State NY Zip Code 11716	
Purpose of Disbursement Door Hangers	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	16790.00
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 104 OF 123			
	<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. PDQ Print and Mail Services		M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address P.O Box 245		Amount of Each Disbursement this Period	
City Bohemia State NY Zip Code 11716		7875.11	
Purpose of Disbursement Postage/Mail/Letters/Print		Transaction ID : SB17.14514	
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	
State: NY District: 01		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. PDQ Print and Mail Services		M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address P.O Box 245		Amount of Each Disbursement this Period	
City Bohemia State NY Zip Code 11716		6737.25	
Purpose of Disbursement Postage/Mail/Letters/Print		Transaction ID : SB17.15342	
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	
State: NY District: 01		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. PDQ Print and Mail Services		M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address P.O Box 245		Amount of Each Disbursement this Period	
City Bohemia State NY Zip Code 11716		12677.46	
Purpose of Disbursement Postage/Mail/Letters/Print		Transaction ID : SB17.15347	
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	
State: NY District: 01		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	27289.82
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 105 OF 123			
	<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. PDQ Print and Mail Services		M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Postage/Mail/Letters/Print	6983.37
Candidate Name Zeldin For Congress	Category/Type 006	Transaction ID : SB17.15350
Office Sought: <input checked="" 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: NY District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. PDQ Print and Mail Services		M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address P.O Box 245		Amount of Each Disbursement this Period
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Postage/Mail/Letters/Print	3516.63
Candidate Name Zeldin For Congress	Category/Type 006	Transaction ID : SB17.15351
Office Sought: <input checked="" 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: NY District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
c. Poland Spring		M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P.O Box 856192		Amount of Each Disbursement this Period
City Louisville State KY Zip Code 40285	Purpose of Disbursement Water for the Office	94.66
Candidate Name Zeldin For Congress	Category/Type 001	Transaction ID : SB17.14541
Office Sought: <input checked="" 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: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	10594.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 123	
	<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. PSEG Long Island		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address P.O. Box 888		Amount of Each Disbursement this Period 289.25 Transaction ID : SB17.14893
City Hicksville	State NY	
Zip Code 11802	Purpose of Disbursement Electric Bill 2014 General	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. Riverhead Republican Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 350.00 Transaction ID : SB17.14677
City Riverhead	State NY	
Zip Code 11901	Purpose of Disbursement Rent for Riverhead Office	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. Sisk Mailing Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 1065.00 Transaction ID : SB17.15285
City Stevensville	State MD	
Zip Code 21666	Purpose of Disbursement 2014 General Expense---Printing and Mailshop	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1704.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 123			
	<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. Sisk Mailing Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 203 Log Canoe Circle		Amount of Each Disbursement this Period 7.47 Transaction ID : SB17.15287
City Stevensville State MD Zip Code 21666	Purpose of Disbursement 2014 General Expense--Shipping Expense 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Smithtown Messenger		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 127 E.Main St		Amount of Each Disbursement this Period 1270.00 Transaction ID : SB17.14553
City Smithtown State NY Zip Code 11787	Purpose of Disbursement Advertising-Newspaper Ads 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Southwest Publishing & Mailing Corp		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 4000 SE Adams St		Amount of Each Disbursement this Period 4303.00 Transaction ID : SB17.15288
City Topeka State KS Zip Code 66609	Purpose of Disbursement 2014 General Expense---Printing and Mailshop 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	5580.47
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 108 OF 123	
	<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 MM / DD / YYYY 11 / 03 / 2014
Mailing Address 1455 Market Street Ste 600		Amount of Each Disbursement this Period 780.13 Transaction ID : SB17.15346
City San Francisco	State CA	
Zip Code 94103	Purpose of Disbursement Credit Card Fees on donations	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 type="checkbox"/> Primary <input checked="" 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 10 / 31 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 121.35 Transaction ID : SB17.14702
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. The East Hampton Star		Date of Disbursement MM / DD / YYYY 10 / 24 / 2014
Mailing Address P.O. Box 5002		Amount of Each Disbursement this Period 1240.00 Transaction ID : SB17.14523
City E.Hampton	State NY	
Zip Code 11937	Purpose of Disbursement Advertising-Newspaper Ads	Category/ Type 004
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	2141.48
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 109 OF 123	
	<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. Dominick Thorne		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 27 East 4th Street		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.14566
City Patchogue State NY Zip Code 11772	Purpose of Disbursement Headquarters Coordinator Category/Type 001	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Times Beacon		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address P.O. Box 707		Amount of Each Disbursement this Period 1075.00 Transaction ID : SB17.14544
City Setauket State NY Zip Code 11733	Purpose of Disbursement Advertising-Newspaper Ads Category/Type 004	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) c. Times Review News Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 7785 Main Rd P.O. Box 1500		Amount of Each Disbursement this Period 1110.00 Transaction ID : SB17.14546
City Mattituck State NY Zip Code 11952	Purpose of Disbursement Advertising-Newspaper Ads Category/Type 004	
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	3185.00
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 110 OF 123	
	<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. Tri-State Envelope Corporation		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address Box 443		Amount of Each Disbursement this Period 1828.29 Transaction ID : SB17.15270
City Beltsville State MD Zip Code 20704	Purpose of Disbursement 2014 General Expense---Printing and Mailing Category/Type 007	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 980.00 Transaction ID : SB17.15343
City Shirley State NY Zip Code 11967	Purpose of Disbursement Postage stamps for mailing 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 980.00 Transaction ID : SB17.15344
City Shirley State NY Zip Code 11967	Purpose of Disbursement Postage stamps for mailing 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	3788.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 123			
	<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 M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 48.00 Transaction ID : SB17.14697
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Opened a new P.O. Box	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 490.00 Transaction ID : SB17.14700
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Stamps	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) c. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.14701
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Stamps	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

SUBTOTAL of Disbursements This Page (optional).....	587.00
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 112 OF 123	
	<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 M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 20130 Lakeview Center Plaza		Amount of Each Disbursement this Period 11215.74 Transaction ID : SB17.15283
City Ashburn State VA Zip Code 20147	Purpose of Disbursement 2014 General Expense--Postage & Delivery 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. US Postmaster		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 20130 Lakeview Center Plaza		Amount of Each Disbursement this Period 45.88 Transaction ID : SB17.15284
City Ashburn State VA Zip Code 20147	Purpose of Disbursement 2014 General Expense--Shipping Expense 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 type="checkbox"/> Primary <input checked="" 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 10 / 16 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 74.99 Transaction ID : SB17.14526
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	11336.61
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 113 OF 123			
	<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 10 / 16 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 47.49 Transaction ID : SB17.14529
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phone 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General 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 10 / 22 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 571.96 Transaction ID : SB17.14530
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phones 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General 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 11 / 21 / 2014
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 630.52 Transaction ID : SB17.14894
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phone Bills 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1249.97
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 114 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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. Villa Grazia		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1665 Middle Country Road		Amount of Each Disbursement this Period 90.35 Transaction ID : SB17.14723
City Centereach State NY Zip Code 11720	Purpose of Disbursement Lunch 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. Waldbaums		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 245 New York 25A		Amount of Each Disbursement this Period 799.18 Transaction ID : SB17.14705
City Rocky Point State NY Zip Code 11778	Purpose of Disbursement Election Day Food 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General 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 11 / 20 / 2014
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 2845.76 Transaction ID : SB17.15273
City Chantilly State VA Zip Code 20151	Purpose of Disbursement Caging and Escrow 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	3735.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 123	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Zeldin For Congress

Full Name (Last, First, Middle Initial) A. Washington Intelligence Bureau		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2014
Mailing Address 4128 Pepsi Place		Amount of Each Disbursement this Period 36.32 Transaction ID : SB17.15274
City Chantilly State VA Zip Code 20151	Purpose of Disbursement Shipping Expense 007 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) B. WLNG		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address P.O. Box 2000		Amount of Each Disbursement this Period 1498.00 Transaction ID : SB17.14517
City Sag Harbor State NY Zip Code 11963	Purpose of Disbursement Commercial Ad 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) C. WRIV		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P.O. Box 1390		Amount of Each Disbursement this Period 280.00 Transaction ID : SB17.14539
City Riverhead State NY Zip Code 11901	Purpose of Disbursement Air Time 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: NY District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1814.32
TOTAL This Period (last page this line number only).....	422845.57

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 116 OF 123
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advantage Direct	Nature of Debt (Purpose): Estimate--Data Capture--Vets/ITB
Mailing Address 2300 Clarendon Blvd Ste 303	
City State Zip Code Arlington VA 22201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15309	
Amount Incurred This Period 1261.44	Payment This Period 0.00	Outstanding Balance at Close of This Period 1261.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advantage Direct	Nature of Debt (Purpose): Estimate---Survey Capture
Mailing Address 2300 Clarendon Blvd Ste 303	
City State Zip Code Arlington VA 22201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15315	
Amount Incurred This Period 1066.42	Payment This Period 0.00	Outstanding Balance at Close of This Period 1066.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advantage Direct	Nature of Debt (Purpose): Estimate---Trump Call
Mailing Address 2300 Clarendon Blvd Ste 303	
City State Zip Code Arlington VA 22201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15314	
Amount Incurred This Period 1946.68	Payment This Period 0.00	Outstanding Balance at Close of This Period 1946.68

1) SUBTOTALS This Period This Page (optional)	4274.54
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Advantage Direct		Nature of Debt (Purpose): Estimate---Volunteer Calls/Romney Call/McCain Call/GOTV
Mailing Address 2300 Clarendon Blvd Ste 303		
City	State	Zip Code
Arlington	VA	22201

Outstanding Balance Beginning This Period	Transaction ID : SD10.15307	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="16347.06"/>	<input type="text" value="0.00"/>	<input type="text" value="16347.06"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eric Amidon		Nature of Debt (Purpose): Paid Expenses for Gas Cards
Mailing Address 7 Meadowgrass Lane		
City	State	Zip Code
Southampton	NY	11968

Outstanding Balance Beginning This Period	Transaction ID : SD10.15328	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="600.00"/>	<input type="text" value="0.00"/>	<input type="text" value="600.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Brabender Cox LLC		Nature of Debt (Purpose): Digital Media
Mailing Address 1218 Grandview Avenue		
City	State	Zip Code
Pittsburgh	PA	15211

Outstanding Balance Beginning This Period	Transaction ID : SD10.15329	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="7512.60"/>	<input type="text" value="0.00"/>	<input type="text" value="7512.60"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="24459.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaigns Unlimited	Nature of Debt (Purpose): Travel Reimbursement Expenses
Mailing Address 47 Flintlock Drive	
City State Zip Code Shirley NY 11967	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15336	
Amount Incurred This Period 822.94	Payment This Period 0.00	Outstanding Balance at Close of This Period 822.94

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jennifer Disiena	Nature of Debt (Purpose): Cell Phone Bill--Train Tickets
Mailing Address 22 Pine Dr	
City State Zip Code Woodbury NY 11797	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15335	
Amount Incurred This Period 141.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 141.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Emanuele	Nature of Debt (Purpose): Drivers
Mailing Address 207 Gibbs Pond Road	
City State Zip Code Nesconset NY 11767	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15338	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)	2464.44
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HSP Direct	Nature of Debt (Purpose): Estimate---Direct Mail
Mailing Address 13755 Sunrise Valley Dr Suite 450	
City State Zip Code Herndon VA 20171	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15337	
Amount Incurred This Period 13026.16	Payment This Period 0.00	Outstanding Balance at Close of This Period 13026.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor JPA Studio	Nature of Debt (Purpose): Photography Services
Mailing Address 48 Birchwood Rd	
City State Zip Code Coram NY 11727	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15318	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Majority Strategies	Nature of Debt (Purpose): Zeldin Doorhanger Design
Mailing Address 135 Professional Drive Suite 104	
City State Zip Code Ponte Vedra Beach FL 32082	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15306	
Amount Incurred This Period 750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 750.00

1) SUBTOTALS This Period This Page (optional)	15776.16
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nancy Marks	Nature of Debt (Purpose): Hotel Accomodations Reimbursement
Mailing Address 47 Flintlock Drive	
City State Zip Code Shirley NY 11967	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15334	
Amount Incurred This Period 370.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 370.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor McLaughlin & Associates Inc	Nature of Debt (Purpose): Polling Consultants/Surveys
Mailing Address 566 South Route 303	
City State Zip Code Blauvelt NY 10913	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15322	
Amount Incurred This Period 13413.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13413.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor McLaughlin & Associates Inc	Nature of Debt (Purpose): Estimate--Survey/Interviews
Mailing Address 566 South Route 303	
City State Zip Code Blauvelt NY 10913	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15323	
Amount Incurred This Period 9427.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9427.00

1) SUBTOTALS This Period This Page (optional)	23210.14
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 121 OF 123
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor North Fork Express	Nature of Debt (Purpose): Campaign Bus used for Volunteers and guests for Fundraisers
Mailing Address 14 Hawkins Ave	
City State Zip Code Ronkonkoma NY 11779	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15320	
Amount Incurred This Period 1996.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1996.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oorbeek Morehouse Strategies, LLC	Nature of Debt (Purpose): Expenses For Fundraisers
Mailing Address 5614 Garnetts Farm Drive	
City State Zip Code Haymarket VA 20169	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15319	
Amount Incurred This Period 1920.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 1920.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oorbeek Morehouse Strategies, LLC	Nature of Debt (Purpose): Washington Fundraising Consultant
Mailing Address 5614 Garnetts Farm Drive	
City State Zip Code Haymarket VA 20169	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15327	
Amount Incurred This Period 4000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4000.00

1) SUBTOTALS This Period This Page (optional)	7916.89
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PDQ Print and Mail Services	Nature of Debt (Purpose): Campaign poster double sided
Mailing Address P.O Box 245	
City State Zip Code Bohemia NY 11716	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15294	
Amount Incurred This Period 375.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 375.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Riverhead Town Republican Committee	Nature of Debt (Purpose): Last Months Rent
Mailing Address 47 Further Lane	
City State Zip Code Riverhead NY 11901	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15326	
Amount Incurred This Period 350.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 350.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jim Soviero	Nature of Debt (Purpose): Driver
Mailing Address 24 Gaul Rd S	
City State Zip Code E.Setauket NY 11733	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15340	
Amount Incurred This Period 750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 750.00

1) SUBTOTALS This Period This Page (optional)	1475.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Zeldin For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Advance Service LLC	Nature of Debt (Purpose): Security for Boehner Fundraiser
Mailing Address 611 Pennsylvania Ave SE #267	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15311	
Amount Incurred This Period 5500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Advance Service LLC	Nature of Debt (Purpose): Fundraiser with Boehner
Mailing Address 611 Pennsylvania Ave SE #267	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15310	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Polling Company	Nature of Debt (Purpose): Polling Consultant
Mailing Address 1220 Connecticut Ave NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.15312	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)	13000.00
2) TOTALS This Period (last page this line number only)	92576.83
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	92576.83