

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Frank Scaturro for Congress

ADDRESS (number and street) 515 Herricks Road
Suite 4
New Hyde Park NY 11040
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00465054
CITY **STATE** NY **ZIP CODE** 11040
STATE DISTRICT NY 04
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 09 14 2010 in the State of NY
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 07 01 2010 through 08 25 2010

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 Mary Ellen Divone

Signature of Treasurer Electronically Filed by Mary Ellen Divone Date 09 02 2010

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Frank Scaturro 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)).....	27667.00	345487.89
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27667.00	344487.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	202504.50	349486.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	150.25	150.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	202354.25	349336.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	207151.69	
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).....	220638.28	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Frank Scaturro for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	8

D	D
2	5

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	20610.00	271120.82
(i) Itemized (use Schedule A).....	7057.00	71529.89
(ii) Unitemized.....	27667.00	342650.71
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	2837.18
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	27667.00	345487.89
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	212000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	212000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	150.25	150.25
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	27817.25	557638.14

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	202504.50	349486.45
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	202504.50	350486.45

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	381838.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	27817.25
25. SUBTOTAL (add Line 23 and Line 24).....	409656.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	202504.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	207151.69

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

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

Mailing Address 250 W. 50th Street
#8D

City State Zip Code
New York NY 10019-6714

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

Name of Employer American Financial & Tax Strategies, I
Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	1	0

Transaction ID: A999D6EB0B6DE417A92E

Amount of Each Receipt this Period
100.00

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

Mailing Address 20 Whitemarsh Road

City State Zip Code
Ardmore PA 19003-1633

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

Name of Employer Littler Mendelson, P.C.
Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	0	/	2	0	1	0

Transaction ID: AC6DE9C606DC845DD971

Amount of Each Receipt this Period
35.00

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

Mailing Address 56 Third Street

City State Zip Code
Garden City NY 11530-4312

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

Name of Employer Onyx Packaging Corporation
Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	1	0

Transaction ID: A8977E273395E49488EE

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1135.00**

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 6 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Thomas A Long		Date of Receipt
	Mailing Address 26 Cathedral Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 12 / 2010
	City	State	Zip Code
	Garden City	NY	11530-4432
	FEC ID number of contributing federal political committee. C		Transaction ID: A899A0A0693784ABE944
Name of Employer DF King & Company		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) Timothy P. Gallagher		Date of Receipt
	Mailing Address 25 Cedar Pl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 10 / 2010
	City	State	Zip Code
	Garden City	NY	11530-5926
	FEC ID number of contributing federal political committee. C		Transaction ID: A0AEB8486724D4DD8948
Name of Employer BGC		Occupation Broker	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

C.	Full Name (Last, First, Middle Initial) Tim Marlin		Date of Receipt
	Mailing Address 4-74 48th Avenue #27F		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 29 / 2010
	City	State	Zip Code
	Long Island City	NY	11109-5621
	FEC ID number of contributing federal political committee. C		Transaction ID: A08F595B42D5E445FA9B
Name of Employer The Hartford		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1350.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Anil Chaturvedi

Mailing Address 225 Liberty Street, 41 FL

City State Zip Code
New York NY 10281-1008

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

Name of Employer Occupation
Bank of America-Merrill Lynch Banking

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: AAE9EBB3A121F438F8B5

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jason T. Zullin

Mailing Address 450 E. 83rd St.
Apt. 21D

City State Zip Code
New York NY 10028-6293

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

Name of Employer Occupation
GFI Group President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2010

Transaction ID: AFC449AAD45994BAB966

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Philip A De Cicco

Mailing Address 29 Lindbergh St

City State Zip Code
Garden City NY 11530-6610

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: A563618B4B67C4F6E81E

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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 8 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) John Kelley		Date of Receipt
	Mailing Address PO Box 1515		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 13 / 2010
	City	State	Zip Code
	Greenwich	CT	06836-1515
	FEC ID number of contributing federal political committee.		Transaction ID: ACD1E10101EB24D33849
		Amount of Each Receipt this Period	<input type="text"/> 1000.00
Name of Employer First American Title Insurance Company		Occupation Sales	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Dr. Stephen J. Cuchel, MD		Date of Receipt
	Mailing Address 333 Earle Ovington Blvd. Suite 300		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 03 / 2010
	City	State	Zip Code
	Uniondale	NY	11553-3645
	FEC ID number of contributing federal political committee.		Transaction ID: AAB7BCDD3954B438F8B9
		Amount of Each Receipt this Period	<input type="text"/> 500.00
Name of Employer Healthplex		Occupation Chairman & CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) David Budinger		Date of Receipt
	Mailing Address 307 East 44th St #520		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 06 / 2010
	City	State	Zip Code
	New York	NY	10017-4409
	FEC ID number of contributing federal political committee.		Transaction ID: A09EB32C8BDAC4C7C8B4
		Amount of Each Receipt this Period	<input type="text"/> 100.00
Name of Employer Retired		Occupation Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 450.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1600.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Mary Murphy

Mailing Address 46 Central Dr.

City State Zip Code
Manhasset NY 11030-1450

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	1	0

Transaction ID: A652AFE2B443B4A33BC7

Amount of Each Receipt this Period
750.00

1250.00

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

Mailing Address 9 Prescott Square

City State Zip Code
Bronxville NY 10708-2206

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

Name of Employer Occupation
BNY ConvergEx Managing Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	3	/	2	0	1	0

Transaction ID: A64ECD2E5AAAC48E0AE6

Amount of Each Receipt this Period
75.00

1075.00

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

Mailing Address 388 Robyn Pl

City State Zip Code
East Meadow NY 11554-4037

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	0	/	2	0	1	0

Transaction ID: A89302A8FC6FB48BA9CC

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1325.00**

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 10 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Mary Murphy

Mailing Address 46 Central Dr.

City State Zip Code
Manhasset NY 11030-1450

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 4 / 2 0 1 0

Transaction ID: A6BA994BD8F93491BA16

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph V. DeMarco

Mailing Address 308 E 79th St #11F

City State Zip Code
New York NY 10075-0998

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

Name of Employer DeVore & DeMarco Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 2 5 / 2 0 1 0

Transaction ID: A54BDC7F3C8BA4919A6E

Amount of Each Receipt this Period
1500.00

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

Mailing Address 1 Union Square S #16C

City State Zip Code
New York NY 10003-4187

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

Name of Employer Cohen Lans LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 7 / 2 8 / 2 0 1 0

Transaction ID: A2390B66B48DF407089C

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 53
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

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

Mailing Address 60 Gerard Ave

City State Zip Code
New Hyde Park NY 11040-1910

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

Name of Employer Occupation
ARC Excess & Surplus LLC Insurance Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 02 / 2010

Transaction ID: A9679516199DE4FFC99C

Amount of Each Receipt this Period
500.00

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

Mailing Address 23 Bismark Ave

City State Zip Code
Valley Stream NY 11581-1406

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

Name of Employer Occupation
South Nassau Communities Hospital Administrative Dir

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 04 / 2010

Transaction ID: AA41D3D30EFE7447FB66

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Constance M. Klemanowicz

Mailing Address 100 Hilton Ave.
Unit 610

City State Zip Code
Garden City NY 11530-1568

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2010

Transaction ID: A687B2E0B48854E5CB93

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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 12 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Terrance J. Nolan, Sr.
Mailing Address 41 Russell St
City Lynbrook State NY Zip Code 11563-1135
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Attorney
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
Amount of Each Receipt this Period 100.00
Transaction ID: A6E87B2A8A2EE4719B9F

B. Full Name (Last, First, Middle Initial)
John Murtaugh
Mailing Address 2000 Lilac Drive
City Westbury State NY Zip Code 11590-5923
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
Amount of Each Receipt this Period 100.00
Transaction ID: A8DCE77721FED4C5FBAF

C. Full Name (Last, First, Middle Initial)
William Howe
Mailing Address 130 Hempstead Ave
City Malverne State NY Zip Code 11565-2250
FEC ID number of contributing federal political committee. **C**
Name of Employer Bradley and Parker, Inc. Occupation Insurance Sales
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
Amount of Each Receipt this Period 25.00
Transaction ID: AC054F7160F2B4824BA4

SUBTOTAL of Receipts This Page (optional) ► **225.00**
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 13 / 53

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)

John C Perry

Mailing Address 48 Calla Ave

City State Zip Code
Floral Park NY 11001-2604

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

Name of Employer Occupation
New York Life Insurance Insurance

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 2 / 2 0 1 0

Transaction ID: AFDB15A36D23B4C269A9

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)

Pamela Gallagher

Mailing Address 31 Daniels Way

City State Zip Code
Bay Shore NY 11706-8234

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

Name of Employer Occupation
ISLAND PLASTIC SURGERY Surgeon

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: AFCCEE37540244240B11

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Roger Severino

Mailing Address 708 Mount Vernon Avenue

City State Zip Code
Alexandria VA 22301-1700

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

Name of Employer Occupation
United States Department of Justice Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 1 0

Transaction ID: A1D22F50A17BD4895909

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ▶

475.00

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 14 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

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

Mailing Address 83 10th Street

City State Zip Code
Garden City NY 11530-1537

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 5 / 2 0 1 0

Transaction ID: AAF3E6DBD93524FBABE8

Amount of Each Receipt this Period
100.00

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

Mailing Address 57 Roxbury Rd

City State Zip Code
Garden City NY 11530-4142

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

Name of Employer Bingham McCutchen LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 4 / 2 0 1 0

Transaction ID: ACC3FB3419531473B8E3

Amount of Each Receipt this Period
200.00

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

Mailing Address 120 Salisbury Ave

City State Zip Code
Garden City NY 11530-4220

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

Name of Employer ACME Metral Cap Co Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 2 1 / 2 0 1 0

Transaction ID: AE50DFEB70E854189AAD

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 15 / 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
Kathleen Ryan

Mailing Address 51 Pell Ter.

City Garden City State NY Zip Code 11530-1928

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

Name of Employer Cathedral Nursery School Occupation Teacher

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 07 / 18 / 2010
Transaction ID: ACED421E995AA484AB7A

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
David N Smith

Mailing Address 114 W 80th St

City New York State NY Zip Code 10024-6328

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

Name of Employer Mak Capital Occupation Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 07 / 29 / 2010
Transaction ID: A983F39F331F144018EC

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Jonathan Hoff

Mailing Address 37 Kenilworth Road

City Rye State NY Zip Code 10580-1910

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

Name of Employer Cadwalader, Wickersham & Taft, LLP Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 08 / 09 / 2010
Transaction ID: AFFDE02D7403043A3A55

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
Myrna Zisman

Mailing Address 40 Maple Ave

City State Zip Code
Cedarhurst NY 11516-2222

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	1	0

Transaction ID: A0126ABD767FB4374A8D

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Brian Saltz

Mailing Address 6 Mindz Court

City State Zip Code
Locust Valley NY 11560-1017

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

Name of Employer Self Occupation Business Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

Transaction ID: A1C0EB34455934CBF85C

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Kathleen Ryan

Mailing Address 51 Pell Ter.

City State Zip Code
Garden City NY 11530-1928

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

Name of Employer Cathedral Nursery School Occupation Teacher

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	1	0

Transaction ID: A8C38A0978D3140A49AE

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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 17 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
Anne Hagen

Mailing Address PO Box 7653

City State Zip Code
Garden City NY 11530-0731

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

Name of Employer Occupation
Hagens Homes Inc Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 23 / 2010

Transaction ID: A428DAEEACAF2432C86E

Amount of Each Receipt this Period
50.00

325.00

B.

Full Name (Last, First, Middle Initial)
Sion Elalouf

Mailing Address PO BOX 336

City State Zip Code
Babylon NY 11702-0336

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

Name of Employer Occupation
Knitting Fever, Inc Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: A697B8B77C3AE4969A38

Amount of Each Receipt this Period
700.00

1700.00

C.

Full Name (Last, First, Middle Initial)
Bart M Schwartz

Mailing Address PO Box 431
14 Salem Hill Road

City State Zip Code
South Salem NY 10590-0431

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2010

Transaction ID: A2E15BB333F9447E7B11

Amount of Each Receipt this Period
500.00

1500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

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

Mailing Address 45-A Roseville Ave

City State Zip Code
Saint James NY 11780-2902

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

Name of Employer Self Occupation
Financial Services Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	1	0

Transaction ID: A4CF94F2DF10B443F93C

Amount of Each Receipt this Period
300.00

Amount of Each Receipt this Period
300.00

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

Mailing Address 7 Rose Lane

City State Zip Code
New Hyde Park NY 11040-1965

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

Name of Employer Retired Occupation
Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	3	/	2	0	1	0

Transaction ID: A46E458A69BA845FD9AF

Amount of Each Receipt this Period
25.00

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Carl J. Chiappa, Esq.

Mailing Address 875 Third Avenue

City State Zip Code
New York NY 10022-6225

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

Name of Employer Hogan & Hartson Occupation
Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	2	/	2	0	1	0

Transaction ID: A78F6D5EBCE564A88BC8

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
1250.00

SUBTOTAL of Receipts This Page (optional) ▶ **575.00**

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

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Marc Andes		Date of Receipt MM / DD / YYYY 07 / 27 / 2010
	Mailing Address 7808 153rd Avenue Apt. E		Transaction ID: AE71588FE0A9D433F807
	City Howard Beach	State NY	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Student	Occupation Student	
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Robert Murray		Date of Receipt MM / DD / YYYY 08 / 18 / 2010
	Mailing Address 21 Oceanview Ave		Transaction ID: A6B3F634C30C64A3A90F
	City Valley Stream	State NY	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested	Occupation Information Requested	
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Thomas Kavalier		Date of Receipt MM / DD / YYYY 08 / 24 / 2010
	Mailing Address 80 Pine Street		Transaction ID: ACF40A969DDDE4DFEB87
	City New York	State NY	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Cahill, Gordon & Reindall	Occupation Partner	
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
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 20 / 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Suzanne Romajas

Mailing Address 9554 Lagersfield Cir.

City Vienna State VA Zip Code 22181-6175

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

Name of Employer U.S. Securities & Exchange Commission Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2010
Transaction ID: A196B1453A41349A1B2A

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard A. Stein

Mailing Address 1759 Aladdin Ave

City New Hyde Park State NY Zip Code 11040-4011

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

Name of Employer New Hyde Park Fire Department Occupation Commissioner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2010
Transaction ID: A328F649873874C6DBFD

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Bill Wisser

Mailing Address 29 Jericho Turnpike

City Jericho State NY Zip Code 11753-1053

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

Name of Employer The Wisser Company Occupation President & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1375.00

Date of Receipt 08 / 25 / 2010
Transaction ID: AB1733FC7C329486F8EB

Amount of Each Receipt this Period 250.00

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: PAGE 21 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
David S Mack

Mailing Address 2115 Linwood Avenue, Suite

City State Zip Code
Fort Lee NJ 07024-5020

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

Name of Employer Occupation
Mack Management & Construction Senior Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	8	/	2	0	1	0

Transaction ID: AA0F6872C56D3406BB3F

Amount of Each Receipt this Period
2400.00

2400.00

B.

Full Name (Last, First, Middle Initial)
Michael Eigen

Mailing Address 148 Scott Drive

City State Zip Code
Atlantic Beach NY 11509-1631

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

Name of Employer Occupation
Ocean Harbor Casualty Insurance Company Insurance Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

Transaction ID: AE27149D6A7814B1BB37

Amount of Each Receipt this Period
250.00

250.00

C.

Full Name (Last, First, Middle Initial)
Mary Aji

Mailing Address 160 Hillside Blvd

City State Zip Code
New Hyde Park NY 11040-2910

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

Name of Employer Occupation
Harvest Real Estate Services Inc. Administrator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	1	0

Transaction ID: A2B7C6105AECB4905BDE

Amount of Each Receipt this Period
150.00

400.00

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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 22 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Gail S Blaustein

Mailing Address 628 Derby Ave

City State Zip Code
Woodmere NY 11598-2740

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
08 / 23 / 2010

Transaction ID: A20BEEBFEB6124BF9A4F

Amount of Each Receipt this Period
250.00

1750.00

B. Full Name (Last, First, Middle Initial)
Mr. Jim McHugh

Mailing Address 15 White Ave.

City State Zip Code
New Hyde Park NY 11040-2842

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

Name of Employer Occupation
Jamaica Hospital & Medical Center Pharmacist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
08 / 01 / 2010

Transaction ID: AFDC35EC42786448CADB

Amount of Each Receipt this Period
1000.00

4250.00

C. Full Name (Last, First, Middle Initial)
Mr. Bill Gallagher

Mailing Address 10 Canfield Ct

City State Zip Code
Potomac MD 20854-2811

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

Name of Employer Occupation
Royal Express Courier

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
08 / 24 / 2010

Transaction ID: A70FC7B37F8724C0EA5D

Amount of Each Receipt this Period
25.00

325.00

SUBTOTAL of Receipts This Page (optional) ► **1275.00**

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 23 / 53
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial)
Paul Hagan

Mailing Address 268 Stewart Ave

City State Zip Code
Garden City NY 11530-2732

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

Name of Employer Self Occupation Consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	1	0

Transaction ID: A6EAD4D6101AB4F54953

Amount of Each Receipt this Period
250.00

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

Mailing Address 48 Calla Ave

City State Zip Code
Floral Park NY 11001-2604

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

Name of Employer New York Life Insurance Occupation Insurance

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	5	/	2	0	1	0

Transaction ID: A21E068778E55425E915

Amount of Each Receipt this Period
150.00

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

Mailing Address 60 Gerard Ave

City State Zip Code
New Hyde Park NY 11040-1910

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

Name of Employer ARC Excess & Surplus LLC Occupation Insurance Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	3	/	2	0	1	0

Transaction ID: ABA509E26E5AD4B4C99C

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶ **20610.00**

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 53

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial) WMS Realty Inc <hr/> Mailing Address 6 Main Avenue <hr/> City Garden City State NY Zip Code 11530 <hr/> Purpose of Disbursement Headquarters Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BED46F75D65A840369C8 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
B. Full Name (Last, First, Middle Initial) New York Elks Lodge #1 <hr/> Mailing Address 57 Hempstead Avenue <hr/> City Lynbrook State NY Zip Code 11563 <hr/> Purpose of Disbursement Room Rental Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3A36BD2BCAA141AC9DC Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
C. Full Name (Last, First, Middle Initial) First Data <hr/> Mailing Address 23 Earl Drive <hr/> City Merrick State NY Zip Code 11566 <hr/> Purpose of Disbursement Merchant Account Usage Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD0A4346B93F0435FAAA Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 495.63

SUBTOTAL of Disbursements This Page (optional) ▶

3995.63

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Alfred D Kellogg Mailing Address 112 Ellison Ave City Bronxville State NY Zip Code 10708 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B7607EE084F1546799EB Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 1158.90 Category/Type
B.	Full Name (Last, First, Middle Initial) Authnet Gateway Billing Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement credit card processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B3052B62A25B2405598E Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 50.80 Category/Type
C.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trail South City Rochester State NY Zip Code 14625 Purpose of Disbursement tax withholdings and fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD36A538AB8544A559B9 Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 1988.03 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3197.73
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Erin Veltman Mailing Address 15 South 2nd Street City New Hyde Park State NY Zip Code 11040 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBE0096A27E354DDEADD Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 1744.79 Category/Type
B.	Full Name (Last, First, Middle Initial) Aaron Goldenberg Mailing Address PO Box 7763 City Greenwich State CT Zip Code 06836 Purpose of Disbursement Online Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4EFA996A4236480083C Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 500.00 Category/Type
C.	Full Name (Last, First, Middle Initial) OPN Mailing Address PO Box 21383 City Columbus State OH Zip Code 43221 Purpose of Disbursement Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B102D3E5F973E4F70B86 Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 2250.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

4494.79

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Kenneth A Auerbach, Esq</p> <p>Mailing Address 100 Austin Street Bldg 2</p> <p>City Patchogue State NY Zip Code 11772</p> <p>Purpose of Disbursement Retainer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2912CACE194542DAAFF</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement campaign software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE7DB7B6C6BA14534880</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 4500.00</p>
<p>C. Full Name (Last, First, Middle Initial) David Atkins</p> <p>Mailing Address 55 West 26th Street #9C</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE1DF6B1A6C174D53B13</p> <p>Date of Disbursement 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1323.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10823.50

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Arent Fox, LLP Mailing Address 1050 Connecticut Avenue, NW City Washington State DC Zip Code 20036 Purpose of Disbursement FEC Compliance Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B2F9C5D6F6DAA4F80983 Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 1685.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Political Media, Inc. Mailing Address 406 First St., SE, 3rd Floor City Washington State DC Zip Code 20003 Purpose of Disbursement website Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B65A3000CE3574509B41 Date of Disbursement 07 / 06 / 2010 Amount of Each Disbursement this Period 1659.95 Category/ Type
C.	Full Name (Last, First, Middle Initial) Majority Strategies Mailing Address 135 Professional Dr #104 City Ponte Vedra Beach State FL Zip Code 32082 Purpose of Disbursement printing services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B7621F8D0025F4964BF3 Date of Disbursement 07 / 06 / 2010 Amount of Each Disbursement this Period 2620.00 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5964.95
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Michael Kane</p> <p>Mailing Address 513 Montauk Highway</p> <p>City Westhampton Beach State NY Zip Code 11978</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B328592D410A84F47994</p> <p>Date of Disbursement MM / DD / YYYY 07 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 911 Panorama Trail South</p> <p>City Rochester State NY Zip Code 14625</p> <p>Purpose of Disbursement payroll service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B55A4353CC6194C2A841</p> <p>Date of Disbursement MM / DD / YYYY 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 112.89</p>
<p>C. Full Name (Last, First, Middle Initial) OPN</p> <p>Mailing Address PO Box 21383</p> <p>City Columbus State OH Zip Code 43221</p> <p>Purpose of Disbursement Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB08F0CBE7F7048FE813</p> <p>Date of Disbursement MM / DD / YYYY 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 2720.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3332.89

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Erin Veltman</p> <p>Mailing Address 15 South 2nd Street</p> <p>City New Hyde Park State NY Zip Code 11040</p> <p>Purpose of Disbursement expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BB86D6B5CC40A4D3BAC0</p> <p>Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 133.50</p>
<p>B. Full Name (Last, First, Middle Initial) David Atkins</p> <p>Mailing Address 55 West 26th Street #9C</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BDAEC3F46A4C44F96B77</p> <p>Date of Disbursement 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 576.73</p>
<p>C. Full Name (Last, First, Middle Initial) Erin Veltman</p> <p>Mailing Address 15 South 2nd Street</p> <p>City New Hyde Park State NY Zip Code 11040</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B6FF226F51F5D4FFAAF9</p> <p>Date of Disbursement 07 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1744.79</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2455.02

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) OPN Mailing Address PO Box 21383 City Columbus State OH Zip Code 43221 Purpose of Disbursement Consultant Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B6F0E08C14DE94F00917 Date of Disbursement 07 / 15 / 2010 Amount of Each Disbursement this Period 5456.70
B.	Full Name (Last, First, Middle Initial) Alfred D Kellogg Mailing Address 112 Ellison Ave City Bronxville State NY Zip Code 10708 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BFF03C291DCFF4A43B7D Date of Disbursement 07 / 15 / 2010 Amount of Each Disbursement this Period 1499.39
C.	Full Name (Last, First, Middle Initial) Michael Kane Mailing Address 513 Montauk Highway City Westhampton Beach State NY Zip Code 11978 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BDA79B51C4B3A4770817 Date of Disbursement 07 / 16 / 2010 Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	7456.09
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Alfred D Kellogg <hr/> Mailing Address 112 Ellison Ave <hr/> City State Zip Code Bronxville NY 10708 <hr/> Purpose of Disbursement expense reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B864973E526E54CEE06 Date of Disbursement 07 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 103.16
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address 911 Panorama Trail South <hr/> City State Zip Code Rochester NY 14625 <hr/> Purpose of Disbursement tax withholdings and fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B78179176008A4ED7B3D Date of Disbursement 07 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 1414.28
C.	Full Name (Last, First, Middle Initial) Aristotle International, Inc. <hr/> Mailing Address 205 Pennsylvania Ave., SE <hr/> City State Zip Code Washington DC 20003 <hr/> Purpose of Disbursement Campaign Software Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0350738D059B4D0090C Date of Disbursement 07 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 2250.00

SUBTOTAL of Disbursements This Page (optional) ▶

3767.44

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial) Dubrow & Company <hr/> Mailing Address PO Box 23 <hr/> City Wyncote State PA Zip Code 19095 <hr/> Purpose of Disbursement printing services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BBED1C1A0F5A84F3E82A Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 35.70
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Thomas Teresky, Esq <hr/> Mailing Address 191 New York Ave <hr/> City Huntington State NY Zip Code 11743 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BAA4C03C374C04644A74 Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 10810.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) PC Signs <hr/> Mailing Address 2534 Commerce Blvd <hr/> City Cincinnati State OH Zip Code 45241 <hr/> Purpose of Disbursement Campaign Signs and Materials Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB2EF28C85D7544A0B2B Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 5178.91
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

16024.61

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Dubrow & Company</p> <p>Mailing Address PO Box 23</p> <p>City Wyncote State PA Zip Code 19095</p> <p>Purpose of Disbursement printing services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B30D3145CB3A14132BC8</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 650.00</p>
<p>B. Full Name (Last, First, Middle Initial) Nassau County Board of Elections</p> <p>Mailing Address 400 County Seat Drive</p> <p>City Mineola State NY Zip Code 11501</p> <p>Purpose of Disbursement photo copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B5565DE33F92849F3A9A</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 247.50</p>
<p>C. Full Name (Last, First, Middle Initial) Michael Kane</p> <p>Mailing Address 513 Montauk Highway</p> <p>City Westhampton Beach State NY Zip Code 11978</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B46E399A4E7564826A14</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1397.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Majority Strategies</p> <p>Mailing Address 135 Professional Dr #104</p> <p>City State Zip Code Ponte Vedra Beach FL 32082</p> <p>Purpose of Disbursement printing services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BFE3A3F1AA66442A6B14</p> <p>Date of Disbursement 07 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 12506.99</p>
<p>B. Full Name (Last, First, Middle Initial) Long Island Power Authority</p> <p>Mailing Address 250 Willis Avenue</p> <p>City State Zip Code Roslyn Heights NY 11577</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BBE1E1DECE8124D01B61</p> <p>Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 664.78</p>
<p>C. Full Name (Last, First, Middle Initial) Thomas Teresky, Esq</p> <p>Mailing Address 191 New York Ave</p> <p>City State Zip Code Huntington NY 11743</p> <p>Purpose of Disbursement Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B044C0592F54E4C4E8F9</p> <p>Date of Disbursement 07 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 10310.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

23481.77

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Alfred D Kellogg <hr/> Mailing Address 112 Ellison Ave <hr/> City State Zip Code Bronxville NY 10708 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B19BF9A32FD6640B3989 Date of Disbursement 07 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 1500.69
B.	Full Name (Last, First, Middle Initial) Erin Veltman <hr/> Mailing Address 15 South 2nd Street <hr/> City State Zip Code New Hyde Park NY 11040 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B19A645B2D3EE4516962 Date of Disbursement 07 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 1744.79
C.	Full Name (Last, First, Middle Initial) Blue Boat Productions <hr/> Mailing Address 160 Garden St <hr/> City State Zip Code Garden City NY 11530 <hr/> Purpose of Disbursement media production Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B6692C761EB874BAE9AF Date of Disbursement 07 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 680.00

SUBTOTAL of Disbursements This Page (optional) ▶

3925.48

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Eric Spinner</p> <p>Mailing Address 36 Carole Avenue</p> <p>City New Hyde Park State NY Zip Code 11040-1964</p> <p>Purpose of Disbursement expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B03CDC14E76C4411092A</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 217.14</p>
<p>B. Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 911 Panorama Trail South</p> <p>City Rochester State NY Zip Code 14625</p> <p>Purpose of Disbursement tax withholdings and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B557093832A46426890D</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1287.44</p>
<p>C. Full Name (Last, First, Middle Initial) Majority Strategies</p> <p>Mailing Address 135 Professional Dr #104</p> <p>City Ponte Vedra Beach State FL Zip Code 32082</p> <p>Purpose of Disbursement printing services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B287E16A04FC14BA29D4</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 13461.35</p>

SUBTOTAL of Disbursements This Page (optional)	14965.93
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Michael Kane</p> <p>Mailing Address 513 Montauk Highway</p> <p>City Westhampton Beach State NY Zip Code 11978</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: B6AF1AAC0E4B94A27826</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Franny Decker</p> <p>Mailing Address 244 14th Place NE #2</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: BED76418414244AFE82E</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1241.56"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: BFAC8F4F236B04F4F99C</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.43"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 1001 2nd Avenue City New Hyde Park State NY Zip Code 11040 Purpose of Disbursement Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF504AB511BAA4EFA9C8 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 176.00
B.	Full Name (Last, First, Middle Initial) Authnet Gateway Billing Mailing Address 808 East Utah Valley Drive City American Fork State UT Zip Code 84003 Purpose of Disbursement credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B8F8A0A2ABEF94AB9A41 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 35.65
C.	Full Name (Last, First, Middle Initial) First Data Mailing Address 23 Earl Drive City Merrick State NY Zip Code 11566 Purpose of Disbursement Merchant Account Usage Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BFB72694A31CF495BA4D Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 1 0 Amount of Each Disbursement this Period 267.08

SUBTOTAL of Disbursements This Page (optional) ▶

478.73

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trail South City Rochester State NY Zip Code 14625 Purpose of Disbursement payroll service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B45688A93C8D14EDF8FA Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 1 0 Amount of Each Disbursement this Period 122.84
B.	Full Name (Last, First, Middle Initial) State Bank of Long Island Mailing Address 699 Hillside Avenue City New Hyde Park State NY Zip Code 11040 Purpose of Disbursement bank fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1A2097C10F1C4EC198F Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 1 0 Amount of Each Disbursement this Period 38.14
C.	Full Name (Last, First, Middle Initial) Cablevision Mailing Address 1111 Stewart Avenue City Bethpage State NY Zip Code 11714 Purpose of Disbursement television service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE4AE546A27424CAEB7B Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0 Amount of Each Disbursement this Period 121.64

SUBTOTAL of Disbursements This Page (optional) ▶

282.62

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) New York Athletic Club Mailing Address 180 Central Park S City New York State NY Zip Code 10019 Purpose of Disbursement event catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB90A66F4FD6E4D4FA8B Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0 Amount of Each Disbursement this Period 1455.11
B.	Full Name (Last, First, Middle Initial) Majority Strategies Mailing Address 135 Professional Dr #104 City Ponte Vedra Beach State FL Zip Code 32082 Purpose of Disbursement printing services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF4ED0034DD004A89A8B Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0 Amount of Each Disbursement this Period 13763.14
C.	Full Name (Last, First, Middle Initial) Thomas Teresky, Esq Mailing Address 191 New York Ave City Huntington State NY Zip Code 11743 Purpose of Disbursement Legal Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B2A6230976EDB41FB8B3 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 1 0 Amount of Each Disbursement this Period 30724.65

SUBTOTAL of Disbursements This Page (optional) ▶

45942.90

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Kenneth A Auerbach, Esq	Transaction ID: B3D2E4A42B7D64573945
	Mailing Address 100 Austin Street Bldg 2	Date of Disbursement MM / DD / YYYY 08 / 11 / 2010
	City Patchogue State NY Zip Code 11772	Amount of Each Disbursement this Period 4638.82
	Purpose of Disbursement Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Erin Veltman	Transaction ID: B791FDDDD384944744A0C
	Mailing Address 15 South 2nd Street	Date of Disbursement MM / DD / YYYY 08 / 12 / 2010
	City New Hyde Park State NY Zip Code 11040	Amount of Each Disbursement this Period 1744.79
	Purpose of Disbursement Salary	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) RunandWin.com	Transaction ID: B38FB608131124A54AA9
	Mailing Address PO Box 2096	Date of Disbursement MM / DD / YYYY 08 / 12 / 2010
	City Aiken State SC Zip Code 29802	Amount of Each Disbursement this Period 1529.00
	Purpose of Disbursement campaign materials	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

7912.61

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial) Aaron Goldenberg <hr/> Mailing Address PO Box 7763 <hr/> City Greenwich State CT Zip Code 06836 <hr/> Purpose of Disbursement Online Consulting Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCCF2AA05557844F0A2D Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Alfred D Kellogg <hr/> Mailing Address 112 Ellison Ave <hr/> City Bronxville State NY Zip Code 10708 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BDA0E0D9BB5D04164BF8 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1499.39
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Alfred D Kellogg <hr/> Mailing Address 112 Ellison Ave <hr/> City Bronxville State NY Zip Code 10708 <hr/> Purpose of Disbursement expense reimbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B09488775A9CF4EC1B83 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 236.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2235.39

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.	Full Name (Last, First, Middle Initial) Majority Strategies Mailing Address 135 Professional Dr #104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement printing services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BF6751DFD030345209C2 Date of Disbursement 08 / 13 / 2010 Amount of Each Disbursement this Period 23252.70
B.	Full Name (Last, First, Middle Initial) Paychex, Inc. Mailing Address 911 Panorama Trail South City State Zip Code Rochester NY 14625 Purpose of Disbursement tax withholdings and fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B57241DF42182431E9C9 Date of Disbursement 08 / 13 / 2010 Amount of Each Disbursement this Period 1280.44
C.	Full Name (Last, First, Middle Initial) Lisa Porteus Mailing Address 15 Blanchard St City State Zip Code Greenlawn NY 11740 Purpose of Disbursement transcription services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: BCC32CD58E02D4F3E88E Date of Disbursement 08 / 14 / 2010 Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

27533.14

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Lukens Company</p> <p>Mailing Address 2800 Shirlington Road 9th Floor</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDF69AEF6B7074C4EA39</p> <p>Date of Disbursement 08 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 4457.41</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Lukens Company</p> <p>Mailing Address 2800 Shirlington Road 9th Floor</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Direct Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B50F380E02FA5444DA7A</p> <p>Date of Disbursement 08 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 5435.23</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B83A93DAE010C449288E</p> <p>Date of Disbursement 08 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 72.82</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9965.46

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 07101</p> <p>Purpose of Disbursement Debt Repayment: CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB73FEFC9A2E44FAE9E8</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 180.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 07101</p> <p>Purpose of Disbursement Debt Repayment: CREDIT CARD: SEE BELOW</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B79C45699B6394424BF0</p> <p>Date of Disbursement 07 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 207.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Long Island Associates</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement entry fee for event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BDD0CF698AD9D4A9FB28</p> <p>Date of Disbursement 04 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 450.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

387.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
entry fee for event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: BD20F162D34694DECB0F

Date of Disbursement

04 / 28 / 2010

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Costco

Mailing Address 1250 Old Country Rd

City Westbury State NY Zip Code 11590

Purpose of Disbursement
event catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B22A78897894243F2A2E

Date of Disbursement

05 / 19 / 2010

Amount of Each Disbursement this Period

373.63

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Capitol Hill Club

Mailing Address 300 1st Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement
event catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: BA1D11D6C577D4150A6C

Date of Disbursement

06 / 08 / 2010

Amount of Each Disbursement this Period

1338.40

[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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

<p>A. Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement campaign software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BD96A20AE219A42708AE</p> <p>Date of Disbursement 06 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 2250.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 1001 2nd Avenue</p> <p>City New Hyde Park State NY Zip Code 11040</p> <p>Purpose of Disbursement mailing supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B75BACAB9C5244EC1BA6</p> <p>Date of Disbursement 06 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 53.73</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Staples Inc</p> <p>Mailing Address 2310 Jericho Turnpike</p> <p>City New Hyde Park State NY Zip Code 11040</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BBF10F89F82834F51996</p> <p>Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 867.85</p> <p>[MEMO ITEM]</p>

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A.

Full Name (Last, First, Middle Initial)
Metro Transportation Authority

Mailing Address 347 Madison Avenue

City State Zip Code
New York NY 10017

Purpose of Disbursement
travel expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B5F7D4733154C4D81BA3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	0

Amount of Each Disbursement this Period

217.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

201799.17

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 50 / 53
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

Transaction ID: C5305BE32B92D4DB68AE

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Frank Scaturro - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 34 Cathedral Ave #3E	
City Hempstead State NY ZIP Code 11550-2026	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
37000.00	0.00	37000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 09 D D 30 Y Y Y Y 2009	On Demand	None % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	37000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 51 / 53
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

Transaction ID: C305A78CCF420457AABF

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Frank Scaturro - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 34 Cathedral Ave #3E	
City Hempstead State NY ZIP Code 11550-2026	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	0.00	150000.00

TERMS

Date Incurred MM DD YY 06 28 2010	Date Due On Demand	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	-----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	150000.00
TOTALS This Period (last page in this line only)	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

Transaction ID: C30DD024D7E474531A8C

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Frank Scaturro - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 34 Cathedral Ave #3E	
City Hempstead State NY ZIP Code 11550-2026	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS

Date Incurred MM DD YY YY 08 04 2009	Date Due On Demand	Interest Rate None % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	25000.00
TOTALS This Period (last page in this line only)	212000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Frank Scaturro for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Credit Card Purchases
Mailing Address PO Box 1270			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period <input type="text" value="7076.36"/>		Transaction ID: D50330D11EBBE4F09B0F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="387.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6689.36"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Credit Card Purchases
Mailing Address PO Box 1270			
City Newark	State NJ	ZIP Code 07101	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D1082E405B0504B179DD	
Amount Incurred This Period <input type="text" value="1948.92"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1948.92"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8638.28"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="8638.28"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="212000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="220638.28"/>