

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of George Demos

ADDRESS (number and street)

PO BOX 378

Check if different  
than previously  
reported. (ACC)

Ronkonkoma

NY

11779

2. FEC IDENTIFICATION NUMBER ▼

C

C00549816

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NY

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
06 / 24 / 2014in the  
State of

NY

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2014

through

M M / D D / Y Y Y Y  
06 / 04 / 2014

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 Robert Cole

Signature of Treasurer

Robert Cole

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
11 / 03 / 2014

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 90

Write or Type Committee Name

**Friends of George Demos**

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	4

	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))....	59470.00	293625.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	59470.00	293625.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	945027.53	1909835.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	945027.53	1909835.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	383789.45	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	2000000.00	

**For further information contact:**

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Friends of George Demos

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

58080.00

287405.00

(ii) Unitemized.....

1390.00

6220.00

(iii) TOTAL of contributions from individuals ▶

59470.00

293625.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

59470.00

293625.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

2000000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

2000000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

59470.00

2293625.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 90

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	945027.53	1909835.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	945027.53	1909835.55

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1269346.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	59470.00
25. SUBTOTAL (add Line 23 and Line 24).....	1328816.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	945027.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	383789.45

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 90

(check only one)

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

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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Matheos Alexandrou****A.**

Mailing Address 8 Oakwood Rd.

City

Rocky Point

State

NY

Zip Code

11778

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2014

**Transaction ID : SA11AI.5329**

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Angelo Anagnos****B.**

Mailing Address 848 Alder Pl.

City

Lodi

State

CA

Zip Code

95242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2014

**Transaction ID : SA11AI.5290**

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

**James Anagnos****C.**

Mailing Address 8551 E. Kettleman Ln.

City

Lodi

State

CA

Zip Code

95240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2014

**Transaction ID : SA11AI.5317**

Amount of Each Receipt this Period

250.00

P2014

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

1500.00

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

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

FOR LINE NUMBER:

PAGE 6 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Eleni Andreopoulou

Mailing Address 17 E. 93rd

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Moutfiore & EisteinOccupation  
Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5100

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

B. Gus Andy

Mailing Address 1317 Beach Ave.

City

Cape May

State

NJ

Zip Code

08204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
La Mer Beachfront InnOccupation  
Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period

200.00

P2014

Full Name (Last, First, Middle Initial)

C. George Argerakis

Mailing Address 200 Old Palisade Rd, #1F

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Board of ProsthodonticsOccupation  
Dentist

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5344

Amount of Each Receipt this Period

500.00

P2014

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

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

1700.00

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

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

FOR LINE NUMBER:

PAGE 7 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Amanda Bagatta

Mailing Address 118 E 60th St. Apt. 5F

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bagata Associates

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period

250.00

P2014

B. George Behrakis

Full Name (Last, First, Middle Initial)

Mailing Address 426 River Rd

City

North Tewksbury

State

MA

Zip Code

01876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gainesborough LLC

Occupation

Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period

1000.00

P2014

C. Jacqueline Berger

Full Name (Last, First, Middle Initial)

Mailing Address 40 W. 4th St.

City

Patchogue

State

NY

Zip Code

11772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5180

Amount of Each Receipt this Period

50.00

P2014

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

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

1300.00

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

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

FOR LINE NUMBER:

PAGE 8 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Ted Bestolarides

Mailing Address 6416 Monitor Pl.

City

Stockton

State

CA

Zip Code

95219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bestolarides, CPA

Occupation

Accountant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5302

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

B. Christos Bettios

Mailing Address 1836 Port Barmouth Pl.

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First American Mortgage Services

Occupation

Chief Information Officer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period

1500.00

P2014

Full Name (Last, First, Middle Initial)

C. Frank Boccio

Mailing Address PO Box 1029

City

Remsenburg

State

NY

Zip Code

11960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2014

Transaction ID : SA11AI.5213

Amount of Each Receipt this Period

35.00

P2014

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

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

2035.00



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

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

FOR LINE NUMBER:

PAGE 9 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Sofia Bookis

A.

Mailing Address 480 Park Ave

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5139

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

Mary Bouklas

B.

Mailing Address PO Box 2548

City

Lake Ronkonkoma

State

NY

Zip Code

11779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5189

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

Nicole Camaras

C.

Mailing Address 1403 High Bluff Dr.

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alliant International University

Occupation

Director of Campus and Student Service

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.5296

Amount of Each Receipt this Period

1000.00

P2014

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

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

1300.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Tykye Camaras

A.

Mailing Address 932 Sandcastle Dr.

City

Corona Del Mar

State

CA

Zip Code

92625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAM Steel

Occupation

Executive

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2014

Transaction ID : SA11AI.5294

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

Frank Carroll

B.

Mailing Address 4 Flint Ct.

City

E. Setauket

State

NY

Zip Code

11733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5259

Amount of Each Receipt this Period

15.00

P2014

Full Name (Last, First, Middle Initial)

Robert Castaldi

C.

Mailing Address PO Box 960

City

Cutchogue

State

NY

Zip Code

11935

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.5211

Amount of Each Receipt this Period

35.00

P2014

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

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

1050.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Patricia Chacopulos

A.

Mailing Address 1 Rue Vallars

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5276

Amount of Each Receipt this Period

2600.00

Redesignate: G2014

Full Name (Last, First, Middle Initial)

Patricia Chacopulos

B.

Mailing Address 1 Rue Vallars

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2014

Transaction ID : SA11AI.5277

Amount of Each Receipt this Period

1600.00

P2014

Full Name (Last, First, Middle Initial)

Stephen Cherpelis

C.

Mailing Address 1900 Sound R.

City

Greenport

State

NY

Zip Code

11944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period

1500.00

P2014

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

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

5700.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5276

This contribution was mistakenly inputted as a primary election contribtion, rather than a general election contribution.  
It was a clerical error.

Form/Schedule:  
Transaction ID:

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

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

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(check only one)

PAGE 13 OF 90

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

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NAME OF COMMITTEE (In Full)  
**Friends of George Demos**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Stephen Cherpelis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 1900 Sound R.		<b>Transaction ID : SA11AI.5130</b>	
City Greenport	State NY	Zip Code 11944	Amount of Each Receipt this Period P2014 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 2500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Cara Chisholm</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 30 / 2014	
Mailing Address 918 N. Sea Rd.		<b>Transaction ID : SA11AI.5219</b>	
City Southampton	State NY	Zip Code 11968	Amount of Each Receipt this Period P2014 35.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 35.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Evan Chriss</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 1055 W. Joppa Rd.		<b>Transaction ID : SA11AI.5105</b>	
City Baltimore	State MD	Zip Code 21204	Amount of Each Receipt this Period P2014 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1135.00	
<b>TOTAL</b> 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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Victor Clausen

A.

Mailing Address 24 Maple Rd.

City

Wading River

State

NY

Zip Code

11792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

75.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		01		2014

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

Joyce Clifford

B.

Mailing Address 36 Lyncliff Rd.

City

Hampton Bays

State

NY

Zip Code

11946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5255

Amount of Each Receipt this Period

15.00

P2014

Full Name (Last, First, Middle Initial)

Joyce Cowden

C.

Mailing Address 1845 Port Charles Pl

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5102

Amount of Each Receipt this Period

1000.00

P2014

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

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

1065.00

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

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

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PAGE 15 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Eugene Crocilla

A.

Mailing Address 17 Bowers Ct.

City

Smithtown

State

NY

Zip Code

11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : SA11AI.5245

Amount of Each Receipt this Period

25.00

P2014

Full Name (Last, First, Middle Initial)

Penelope Dambassis

B.

Mailing Address 860 5th Ave.

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

Ralph Decicco

C.

Mailing Address 10 E. Point Ln.

City

Hampton Bays

State

NY

Zip Code

11946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

15.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period

15.00

P2014

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

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

540.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Gerard Decima

A.

Mailing Address 24 Joan Ct.

City

Holtsville

State

NY

Zip Code

11742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period

25.00

P2014

Full Name (Last, First, Middle Initial)

Bernardine Demasi

B.

Mailing Address 9 Widgeon Rd.

City

Center Moriches

State

NY

Zip Code

11934

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5107

Amount of Each Receipt this Period

100.00

P2014

Full Name (Last, First, Middle Initial)

Anthony Diamataris

C.

Mailing Address 12 Pheasant Hill Ln

City

Old Brookville

State

NY

Zip Code

11545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

National Herald

Publisher

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period

500.00

P2014

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

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

625.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

August Drenzo

Mailing Address 10 E. 70th

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cushman &amp; Walker

Occupation

Real Estate Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5079

Amount of Each Receipt this Period

200.00

P2014

Full Name (Last, First, Middle Initial)

Evangeline Douris

Mailing Address 2 Sutton Place South

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.5158

Amount of Each Receipt this Period

175.00

P2014

Full Name (Last, First, Middle Initial)

Nikitas Drakotos

Mailing Address 5441 Palisade Ave.

City

Bronx

State

NY

Zip Code

10471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Drakotos Reality

Occupation

Realtor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period

1000.00

P2014

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

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

1375.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Demetrios Drallios

A.

Mailing Address 16 Sycamore Dr.

City

Roslyn

State

NY

Zip Code

11576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

Gregory Econn

B.

Mailing Address 9744 Wilshire Blvd

City

Beverly Hills

State

CA

Zip Code

90212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Venbrooke Insurance

Managing Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

Mercos Erotokritou

C.

Mailing Address 131 Horseblock Rd.

City

Centereach

State

NY

Zip Code

11720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5193

Amount of Each Receipt this Period

35.00

P2014

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

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

1085.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

William Filios

A.

Mailing Address 5348 Saint Andrews Dr.

City

Stockton

State

CA

Zip Code

95219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AKF Development

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SA11AI.5298

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

Helen Foley

B.

Mailing Address 81 Rocky Point Yaphank Rd.

City

Rocky Point

State

NY

Zip Code

11778

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5195

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

Robert Forstbauer

C.

Mailing Address 77 Moriches Ave.

City

Mastic

State

NY

Zip Code

11950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bauer Office Solutions

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period

200.00

P2014

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

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

1235.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Estelle Fusco

Mailing Address 72 Moriches Rd.

City

Lake Grove

State

NY

Zip Code

11755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5201

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

B. Michael Galanakis

Mailing Address 3356 Wisconsin Avenue

City

South Gate

State

CA

Zip Code

90280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Galanakis, Esq.

Occupation

Attorney/developer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Transaction ID : SA11AI.5152

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

C. Gus Gianulias

Mailing Address 2264 Fair Oaks Blvd.

City

Sacramento

State

CA

Zip Code

95825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gianulias Property Management

Occupation

Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period

1000.00

P2014

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

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

1535.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 21 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Julie Gianulias****A.**

Mailing Address 6315 Oakridge Way

City

Sacramento

State

CA

Zip Code

95831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

**Transaction ID : SA11AI.5103**

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

**William Hill****B.**

Mailing Address 91 Wood Rd.

City

Centereach

State

NY

Zip Code

11720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

**Transaction ID : SA11AI.5117**

Amount of Each Receipt this Period

20.00

P2014

Full Name (Last, First, Middle Initial)

**Jeffery Hipshman****C.**

Mailing Address 11 Eastbourne Bay

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HMWC CPAs &amp; Business Advisors

Occupation

CPA, Partner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		29		2014

**Transaction ID : SA11AI.5085**

Amount of Each Receipt this Period

1000.00

P2014

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

2020.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Peter Hoehmann

A.

Mailing Address 14 Graces Way

City

Centereach

State

NY

Zip Code

11720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Island Transportation Corp

Occupation

Driver

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.5096

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

K.P. Huber

B.

Mailing Address 16101 N. Ray Rd.

City

Lodi

State

CA

Zip Code

95242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Grupe Corporation

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		18		2014

Transaction ID : SA11AI.5323

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

John Huey

C.

Mailing Address 23 Widener Ln.

City

Southampton

State

NY

Zip Code

11968

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.5265

Amount of Each Receipt this Period

10.00

P2014

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

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

310.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Linda Huskisson

A.

Mailing Address 72 Pond Cir.

City

Mount Sinai

State

NY

Zip Code

11766

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2014

Transaction ID : SA11AI.5223

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

Judith Jackson

B.

Mailing Address 26 Firemans Memorial Drive

City

Pomona

State

NY

Zip Code

10970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5552

Amount of Each Receipt this Period

400.00

Redesignate:

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Jaharis

C.

Mailing Address 499 Park Avenue

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5272

Amount of Each Receipt this Period

400.00

General 2014

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

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

435.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5272

This contribution was mistakenly designated as a Primary 2014 contribution, instead of a General 2014 contribution.

Form/Schedule:  
Transaction ID:



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

Use separate schedule(s)  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Friends of George Demos**

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

Mailing Address 499 Park Avenue

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y  
05 20 2014

Transaction ID : SA11AI.5551

Amount of Each Receipt this Period

-400.00

Redesignate: P2014

[MEMO ITEM]

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

Mailing Address 499 Park Avenue

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Self Investor

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y  
05 20 2014

Transaction ID : SA11AI.5271

Amount of Each Receipt this Period

2600.00

G2014

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

Mailing Address 499 Park Avenue

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Self Investor

Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y  
05 20 2014

Transaction ID : SA11AI.5554

Amount of Each Receipt this Period

-2600.00

Redesignate: P2014

[MEMO ITEM]

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

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

2600.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.5551

This contribution was mistakenly designated as a Primary 2014 contribution, instead of a General 2014 contribution.

Form/Schedule: SA11AI

Transaction ID: SA11AI.5271

This item was mistakenly imputed as a Primary 2014 contribution, when it should have been inputted as a general election 2014 contribution

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Michael Jaharis

A.

Mailing Address 499 Park Avenue

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Investor

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5555

Amount of Each Receipt this Period

2600.00
---------

Redesignate:

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Johnson

B.

Mailing Address 155 E. 76 St.

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HomemakerOccupation  
Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		12		2014

Transaction ID : SA11AI.5321

Amount of Each Receipt this Period

250.00
--------

P2014

Full Name (Last, First, Middle Initial)

George Kallins

C.

Mailing Address 16 Deerwood Ln.

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACP ManagementOccupation  
President and CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5284

Amount of Each Receipt this Period

1500.00
---------

P2014

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

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

1750.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

James Kallins

A.

Mailing Address 9756 Downey Sanford Brg Rd

City

Downey

State

CA

Zip Code

90240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period

2000.00

P2014

Full Name (Last, First, Middle Initial)

Lily Katos

B.

Mailing Address 365 Summit Drive

City

Mattituck

State

NY

Zip Code

11952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5336

Amount of Each Receipt this Period

200.00

P2014

Full Name (Last, First, Middle Initial)

Kostas Kavayiotidis

C.

Mailing Address 1000 Galloway Street

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pacific Southwest Realty Services

Occupation

Commercial Mortgage Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2014

Transaction ID : SA11AI.5127

Amount of Each Receipt this Period

1000.00

P2014

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

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

3200.00

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

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Frank Knoll**

**A.**

Mailing Address PO Box 136

City

Montauk

State

NY

Zip Code

11954

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11AI.5176**

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

**George Kofinas**

**B.**

Mailing Address 100 Winston Dr, PHH N

City

Cliffside Park

State

NJ

Zip Code

07010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Kofinas, MD

Physician

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : SA11AI.5342**

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

**Stella Kokolis**

**C.**

Mailing Address 452 Bay Ridge Parkway

City

Brooklyn

State

NY

Zip Code

11209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : SA11AI.5133**

Amount of Each Receipt this Period

500.00

P2014

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

1550.00

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

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

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

George Konomos

A.

Mailing Address 12 E 86th st. #1021

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GN Petroleum Networks

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5081

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

Hercules Kontos

B.

Mailing Address 302A W. 12th St. #246

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accountants, Auditors, &amp; consultants

Occupation

CPA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5070

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

George Kotsonis

C.

Mailing Address 126 E. 71st

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kotsonis Management LLC

Occupation

Self

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5098

Amount of Each Receipt this Period

500.00

P2014

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

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

1000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Marie Kotsonis

A.

Mailing Address 20 E. 74th St.

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		14		2014

Transaction ID : SA11AI.5308

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

Charles Lane

B.

Mailing Address 139 Ardito Ave.

City

Kings Park

State

NY

Zip Code

11754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2014

Transaction ID : SA11AI.5227

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

William Lappas

C.

Mailing Address PO Box 1779

City

Woodbridge

State

CA

Zip Code

95258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Woodbridge Capital Partners, LLC

Occupation

Senior Managing Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2014

Transaction ID : SA11AI.5306

Amount of Each Receipt this Period

500.00

P2014

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

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

1035.00

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

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

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NAME OF COMMITTEE (In Full)  
**Friends of George Demos**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Maria Long</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 171 E. 84th St. 15c			<b>Transaction ID : SA11AI.5089</b>	
City	State	Zip Code		
New York	NY	10028		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period P2014	
Name of Employer Homemaker			100.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 100.00	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Leslie Ann Lynch</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2014	
Mailing Address 214 Main St.			<b>Transaction ID : SA11AI.5191</b>	
City	State	Zip Code		
Center Moriches	NY	11934		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period P2014	
Name of Employer Homemaker			35.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 35.00	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Maria Lyras</b>			Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 970 Park Ave			<b>Transaction ID : SA11AI.5087</b>	
City	State	Zip Code		
New York	NY	10028		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period P2014	
Name of Employer Homemaker			250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 250.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....			385.00	
<b>TOTAL</b> This Period (last page this line number only).....				



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Nick Mackres**

Mailing Address 9 Halsey Ave.

City

Bayville

State

NJ

Zip Code

08721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Windessa Group

Occupation

Managing Member

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Frank Maiello**

Mailing Address 171 Mill Rd.

City

Holbrook

State

NY

Zip Code

11741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

65.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Transaction ID : SA11AI.5232

Amount of Each Receipt this Period

30.00

P2014

Full Name (Last, First, Middle Initial)

**T.A. Malinowski**

Mailing Address 204 Bishops Rd.

City

Smithtown

State

NY

Zip Code

11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : SA11AI.5119

Amount of Each Receipt this Period

10.00

P2014

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

290.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Carol Mann

Mailing Address 11 E 68th St

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing federal political committee.

C

Name of Employer

Stribbling &amp; Asc.

Occupation

Real Estate Broker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5154

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

B. Michael Maresca

Mailing Address 26 Kyle Rd.

City

Hampton Bays

State

NY

Zip Code

11946

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		18		2014

Transaction ID : SA11AI.5174

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

C. Maria Marinakis

Mailing Address 242 E. 74th St.

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5310

Amount of Each Receipt this Period

500.00

P2014

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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**David Matty**

Mailing Address 27854 Somerset Lane

City

San Juan Capistrano

State

CA

Zip Code

92675

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ConvergenceOccupation  
CEO

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

**Paul Mavromihalis**

Mailing Address 11371 Iager BLVD Unite 2

City

Fulton

State

MD

Zip Code

20759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lockheed MartinOccupation  
Process Engineer

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		01		2014

Transaction ID : SA11AI.5315

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Kathleen McFadden**

Mailing Address 147 Laurance Ln.

City

Ridge

State

NY

Zip Code

11961

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		01		2014

Transaction ID : SA11AI.5225

Amount of Each Receipt this Period

35.00

P2014

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

785.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**John McGrath**

**A.** Mailing Address **Best Efforts**

City

**Best Efforts**

State

**NY**

Zip Code

**00000**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Best Efforts**

Occupation

**Best Efforts**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**300.00**

Date of Receipt

**04 / 23 / 2014**

**Transaction ID : SA11AI.5330**

Amount of Each Receipt this Period

**200.00**

**P2014**

Full Name (Last, First, Middle Initial)

**B. Daniel Meehan**

Mailing Address **69 Bobann Dr.**

City

**Nesconset**

State

**NY**

Zip Code

**11767**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**50.00**

Date of Receipt

**05 / 22 / 2014**

**Transaction ID : SA11AI.5182**

Amount of Each Receipt this Period

**50.00**

**P2014**

Full Name (Last, First, Middle Initial)

**C. SPIROS MILONAS**

Mailing Address **171 WEST 57TH STREET, APT. 11C**

City

**NEW YORK**

State

**NY**

Zip Code

**10019**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**IONIAN MANAGEMENT INC.**

Occupation

**EXECUTIVE**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

**05 / 22 / 2014**

**Transaction ID : SA11AI.5094**

Amount of Each Receipt this Period

**500.00**

**P2014**

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

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

**750.00**

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

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Susan Monaco**

**A.**

Mailing Address 27 Brookvale Ln.

City

Lake Grove

State

NY

Zip Code

11755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : SA11AI.5251**

Amount of Each Receipt this Period

20.00

P2014

Full Name (Last, First, Middle Initial)

**Margaret Nagengast**

**B.**

Mailing Address PO Box 2942

City

Setauket

State

NY

Zip Code

11733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 27 / 2014

**Transaction ID : SA11AI.5186**

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

**Bess Nicholas**

**C.**

Mailing Address 33 E End Ave

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : SA11AI.5137**

Amount of Each Receipt this Period

250.00

P2014

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

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

320.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Steve Nicolaou**

**A.**

Mailing Address 1068 Atherton Dr.

City

Tracy

State

CA

Zip Code

95304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : SA11AI.5292**

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

**Christina Nikolopoulos**

**B.**

Mailing Address PO Box 81

City

Remsenburg

State

NY

Zip Code

11960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

175.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2014

**Transaction ID : SA11AI.5160**

Amount of Each Receipt this Period

175.00

P2014

Full Name (Last, First, Middle Initial)

**Gregory O'Leary**

**C.**

Mailing Address 1784 N. San Joaquin St.

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Colliers International

Occupation

Senior Vice President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 09 / 2014

**Transaction ID : SA11AI.5319**

Amount of Each Receipt this Period

250.00

P2014

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

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

1425.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Kenneth O'Shea

A.

Mailing Address 425 Hampton Rd.

City

Southampton

State

NY

Zip Code

11968

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		24		2014

Transaction ID : SA11AI.5237

Amount of Each Receipt this Period

25.00

P2014

Full Name (Last, First, Middle Initial)

James Orphanides

B.

Mailing Address 35 Brearly Rd.

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Centurion Holdings LLC

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period

1000.00

P2014

Full Name (Last, First, Middle Initial)

George Pallace

C.

Mailing Address 467 Thrift St.

City

Ronkonkoma

State

NY

Zip Code

11779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.5267

Amount of Each Receipt this Period

10.00

P2014

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

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

1035.00

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

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NAME OF COMMITTEE (In Full)  
**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**James Pantelidis**

Mailing Address 14 West 23rd St.

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pan Brothers

Occupation

Chairman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2014

Transaction ID : SA11AI.5312

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

**Marilyn Parrillo**

Mailing Address 109 Maple St

City

Medford

State

NY

Zip Code

11763

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Neil L. Bellet M.D.

Occupation

Dr of Derm

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 03 / 2014

Transaction ID : SA11AI.5121

Amount of Each Receipt this Period

10.00

P2014

Full Name (Last, First, Middle Initial)

**Mary Perry**

Mailing Address 480 Park Ave, apt 8B

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11AI.5132

Amount of Each Receipt this Period

500.00

P2014

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

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

1010.00



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

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**John Peters**

**A.**

Mailing Address 4985 Peconic Bay Blvd.

City

Laurel

State

NY

Zip Code

11948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y  
05 18 2014

**Transaction ID : SA11AI.5233**

Amount of Each Receipt this Period

25.00

P2014

Full Name (Last, First, Middle Initial)

**Evangelina Ponerros**

**B.**

Mailing Address 287 Oakwood Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ponerros, Esq.

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 20 2014

**Transaction ID : SA11AI.5350**

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Paulette Poulos**

**C.**

Mailing Address 10 City Place

City

White Plains

State

NY

Zip Code

10601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Leadership 100

Occupation

Executive Director

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
05 28 2014

**Transaction ID : SA11AI.5314**

Amount of Each Receipt this Period

300.00

P2014

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

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

575.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Vasilios Priskos

A.

Mailing Address 51 E. 400 S.

City

Salt Lake City

State

UT

Zip Code

84111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

InterNet Properties

Occupation

Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		11		2014

Transaction ID : SA11AI.5093

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

G.A. Ranglas

B.

Mailing Address 3444 Camino del Rio N.

City

San Diego

State

CA

Zip Code

92108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Forest Park III Genpar LLC

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		04		2014

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period

1500.00

P2014

Full Name (Last, First, Middle Initial)

Agnes Reynolds-Russo

C.

Mailing Address PO Box 62

City

East Marion

State

NY

Zip Code

11939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : SA11AI.5112

Amount of Each Receipt this Period

35.00

P2014

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

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

1785.00

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

Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Guntram Richter

Mailing Address 7 Valleywood Ct. W.

City

Saint James

State

NY

Zip Code

11780

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		26		2014

Transaction ID : SA11AI.5115

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

B. Cassandra Romas

Mailing Address 153 Tennyson Dr.

City

Short Hills

State

NJ

Zip Code

07078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bouras Properties

Occupation

Property Manager

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

C. Lena Sampson

Mailing Address 251 Dare Rd.

City

Selden

State

NY

Zip Code

11784

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		26		2014

Transaction ID : SA11AI.5209

Amount of Each Receipt this Period

35.00

P2014

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

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

570.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Donna Sarrica

A.

Mailing Address 945 5th Ave, Apt 4B

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Park Pizzeria &amp; Restaurant

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5123

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

Charles Sauer

B.

Mailing Address 82 Sheppard Ln.

City

Nesconset

State

NY

Zip Code

11767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2014

Transaction ID : SA11AI.5268

Amount of Each Receipt this Period

10.00

P2014

Full Name (Last, First, Middle Initial)

Santo Sfogliano

C.

Mailing Address 1661 Old Country Rd.

City

Riverhead

State

NY

Zip Code

11901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2014

Transaction ID : SA11AI.5270

Amount of Each Receipt this Period

5.00

P2014

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

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

265.00

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

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Janet Sindoni**

Mailing Address 525 E 72nd st, Apt. 421

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New Park Pizzeria & Restaurant

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

Transaction ID : SA11AI.5125

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**George Skoufis**

Mailing Address 2886 Thornbriar Rd.

City

Atlanta

State

GA

Zip Code

30340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 23 / 2014

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

**Estelle Sotirhos**

Mailing Address 1800 S. Ocean Blvd.

City

Pompano Beach

State

FL

Zip Code

33062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2014

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period

1000.00

P2014

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

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

1300.00

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

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

FOR LINE NUMBER:

PAGE 46 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Alex Spanos

Mailing Address 10100 Trinity Parkway

City

Stockton

State

CA

Zip Code

95219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A.G. Spanos Companies

Occupation

Founder/retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04		29		2014

Transaction ID : SA11AI.5068

Amount of Each Receipt this Period

2500.00

P2014

Full Name (Last, First, Middle Initial)

B. Stanley Spolski

Mailing Address 5 Mcarthur Lane

City

Smithtown

State

NY

Zip Code

11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		03		2014

Transaction ID : SA11AI.5109

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

C. Mary Stark

Mailing Address 9 Settlers Way

City

Setauket

State

NY

Zip Code

11733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period

35.00

P2014

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

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

2585.00

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

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

FOR LINE NUMBER:

PAGE 47 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Christ Stratakis

Mailing Address 50 Sutton Place South

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Poles Tublin

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5275

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

B. Tony Streich

Mailing Address 210 West 70th St.

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HSBC

Occupation

Investment Banker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.5091

Amount of Each Receipt this Period

200.00

P2014

Full Name (Last, First, Middle Initial)

C. Winifred Sulander

Mailing Address 166 Village Dr.

City

Hauppauge

State

NY

Zip Code

11788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5197

Amount of Each Receipt this Period

35.00

P2014

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

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

735.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 48 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Daniel Sullivan****A.**

Mailing Address 6 Lenore Ct.

City

Port Jefferson Station

State

NY

Zip Code

11776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		19		2014

**Transaction ID : SA11AI.5263**

Amount of Each Receipt this Period

10.00

P2014

Full Name (Last, First, Middle Initial)

**Apostolos Tambakis****B.**

Mailing Address 530 E. 76th St.

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Brooklyn Central Medical Group

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		25		2014

**Transaction ID : SA11AI.5327**

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Christopher Tavlarides****C.**

Mailing Address 2912 Olive St

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capitol Outdoor

Occupation

Media

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2014

**Transaction ID : SA11AI.5073**

Amount of Each Receipt this Period

1000.00

G2014

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

1260.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**Nicholas Theoharides**

**A.**

Mailing Address PO Box 1202

City

Southold

State

NY

Zip Code

11971

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

20.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 14 / 2014

**Transaction ID : SA11AI.5247**

Amount of Each Receipt this Period

20.00

P2014

Full Name (Last, First, Middle Initial)

**Christine Triant**

**B.**

Mailing Address 15 E. 82nd St.

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 21 / 2014

**Transaction ID : SA11AI.5325**

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Loucas Tsilas**

**C.**

Mailing Address 645 5th Ave #304

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : SA11AI.5083**

Amount of Each Receipt this Period

250.00

P2014

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

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

520.00

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

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

FOR LINE NUMBER:

PAGE 50 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Maroula Tsimis

A.

Mailing Address 505 E 79th St. Apt. 12b

City

New York

State

NY

Zip Code

10075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

Artemios Tsismenakis

B.

Mailing Address PO Box 275

City

East Marion

State

NY

Zip Code

11939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

Transaction ID : SA11AI.5178

Amount of Each Receipt this Period

50.00

P2014

Full Name (Last, First, Middle Initial)

Athena Tuleja

C.

Mailing Address PO Box 278

City

Wading River

State

NY

Zip Code

11792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5199

Amount of Each Receipt this Period

35.00

P2014

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

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

335.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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PAGE 51 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**D.F. Tzoannos**

Mailing Address 301 E 75th st.

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5143

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Theodore Vakrinos**

Mailing Address 7822 Ridgecrest Drive

City

ALEXANDRIA

State

VA

Zip Code

22308

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vakrinos, ESQ.

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2014

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

**Dean Vallis**

Mailing Address 2100 Linwood Avenue

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bounce Entertainment

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5347

Amount of Each Receipt this Period

250.00

P2014

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

750.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Theodora Vardis

A.

Mailing Address 390 Greenwich St

City

New York

State

NY

Zip Code

10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5145

Amount of Each Receipt this Period

250.00

P2014

Full Name (Last, First, Middle Initial)

Theodore Veru

B.

Mailing Address 3 Bridle Way

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

Nectarios Vouloumanos

C.

Mailing Address 49 Cleveland St

City

Caldwell

State

NJ

Zip Code

07006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Executive

Occupation

Vouloumanos Finance

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5340

Amount of Each Receipt this Period

500.00

P2014

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

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

1250.00

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

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

FOR LINE NUMBER:

PAGE 53 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

William Wilson

A.

Mailing Address PO Box 2216

City

Sag Harbor

State

NY

Zip Code

11963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2014

Transaction ID : SA11AI.5114

Amount of Each Receipt this Period

35.00

P2014

Full Name (Last, First, Middle Initial)

Jerome Wilverding

B.

Mailing Address 4982 Bay View Cir

City

Stockton

State

CA

Zip Code

95219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

San Joaquin County

Occupation

Auditor-controller

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2014

Transaction ID : SA11AI.5304

Amount of Each Receipt this Period

500.00

P2014

Full Name (Last, First, Middle Initial)

Dorothy Zehner

C.

Mailing Address PO Box 250

City

Greenport

State

NY

Zip Code

11944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5203

Amount of Each Receipt this Period

35.00

P2014

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

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

570.00

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

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

FOR LINE NUMBER:

PAGE 54 OF 90

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of George Demos

Full Name (Last, First, Middle Initial)

Demosthenis Zeppos

A.

Mailing Address 22 Knotty Oak Cir.

City

Coto de Caza

State

CA

Zip Code

92679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Zeppos Law Firm

Occupation

President

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2014

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period

1500.00

P2014

Full Name (Last, First, Middle Initial)

Ioannis Zervoudakis

B.

Mailing Address 1320 York Ave. #34B

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cornell Medical College

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		20		2014

Transaction ID : SA11AI.5077

Amount of Each Receipt this Period

200.00

P2014

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

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

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

1700.00

58080.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. AJF and Associates**

Mailing Address 16 N Astor Street

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

25599.00
----------

Transaction ID : SB17.5061

**B. AJF and Associates**

Mailing Address 16 N Astor Street

City	State	Zip Code
Irvington	NY	10533

Purpose of Disbursement  
Polling

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

Amount of Each Disbursement this Period

12428.24
----------

Transaction ID : SB17.5060

**C. Amtrak**

Mailing Address 60 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Train tickets

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2014

Amount of Each Disbursement this Period

447.00
--------

Transaction ID : SB17.4942

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

38474.24

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type

Transaction ID : SB17.5050

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

75.00
-------

Purpose of Disbursement  
Wire feesCategory/  
Type

Transaction ID : SB17.5049

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type

Transaction ID : SB17.5048

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

125.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5047**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5046**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5045**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

75.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5044**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5043**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5042**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

75.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement  
Wire Fee

Amount of Each Disbursement this Period

25.00
-------

**Transaction ID : SB17.5040**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement  
Wire

Amount of Each Disbursement this Period

25.00
-------

**Transaction ID : SB17.5041**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Purpose of Disbursement  
wire fee

Amount of Each Disbursement this Period

25.00
-------

**Transaction ID : SB17.5039**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

75.00
-------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Chase**

Mailing Address 601 Portion Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Lake Ronkonkoma	NY	11779

Amount of Each Disbursement this Period

25.00
-------

Purpose of Disbursement  
WireCategory/  
Type**Transaction ID : SB17.5038**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Collective**

Mailing Address 99 Park Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

City	State	Zip Code
New York	NY	10016

Amount of Each Disbursement this Period

8974.23
---------

Purpose of Disbursement  
Internet AdsCategory/  
Type**Transaction ID : SB17.5033**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Edison Hotel**

Mailing Address 228 W 47th St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2014

City	State	Zip Code
New York	NY	10036

Amount of Each Disbursement this Period

533.12
--------

Purpose of Disbursement  
HotelCategory/  
Type**Transaction ID : SB17.5063**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

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

9532.35

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Fusion Management Systems**

Mailing Address 95 Route 17 South

City	State	Zip Code
Paramus	NJ	06752

Purpose of Disbursement  
Internet Ads

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.5032

**B. Fusion Management Systems**

Mailing Address 95 Route 17 South

City	State	Zip Code
Paramus	NJ	06752

Purpose of Disbursement  
Internet Ads

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.5031

**c. In The Field Consulting**

Mailing Address 1520 Myron Street

City	State	Zip Code
Niskayuna	NY	12309

Purpose of Disbursement  
Media Buy

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2014

Amount of Each Disbursement this Period

39244.00
----------

Transaction ID : SB17.5029

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

42244.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. In The Field Consulting**

Mailing Address 1520 Myron Street

City	State	Zip Code
Niskayuna	NY	12309

Purpose of Disbursement  
Media Buy

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

258984.00
-----------

Transaction ID : SB17.5025

**B. Phil Junquera**

Mailing Address 55 Egypt Close

City	State	Zip Code
E. Hampton	NY	11937

Purpose of Disbursement  
Volunteer Stipend

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.5556

**c. Phil Junquera**

Mailing Address 55 Egypt Close

City	State	Zip Code
E. Hampton	NY	11937

Purpose of Disbursement  
Volunteer Gas and toll reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

507.82
--------

Transaction ID : SB17.5557

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

260491.82

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Labels and Lists**

Mailing Address 2500 116th Avenue NE

City	State	Zip Code
Bellevue	WA	98004

Purpose of Disbursement  
Voter Data

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.5021

**B. Lowe's**

Mailing Address 2150 Nesconset Highway

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

43.43
-------

Transaction ID : SB17.4989

**c. Optimum**

Mailing Address 11 Industrial Road

City	State	Zip Code
Port Jefferson	NY	11777

Purpose of Disbursement  
Phone, TV, and Internet

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

Amount of Each Disbursement this Period

226.91
--------

Transaction ID : SB17.4927

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

2770.34



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Optimum**

Mailing Address 11 Industrial Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

City	State	Zip Code
Port Jefferson	NY	11777

Amount of Each Disbursement this Period

148.41
--------

Purpose of Disbursement  
Phone, TV, and InternetCategory/  
Type**Transaction ID : SB17.4958**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

11.25
-------

Purpose of Disbursement  
FeeCategory/  
Type**Transaction ID : SB17.4924**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
San Francisco	CA	94105

Amount of Each Disbursement this Period

4.50
------

Purpose of Disbursement  
FeeCategory/  
Type**Transaction ID : SB17.4928**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

164.16







**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

22.50
-------

Transaction ID : SB17.4966

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

22.50
-------

Transaction ID : SB17.4973

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

67.50
-------

Transaction ID : SB17.4974

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

112.50

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

53.11
-------

Transaction ID : SB17.4975

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		23		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

8.60
------

Transaction ID : SB17.4976

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement  
Fee

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

1.51
------

Transaction ID : SB17.4977

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

53.11

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. PSEG**

Mailing Address 460 E. Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

City	State	Zip Code
Patchogue	NY	11772

Amount of Each Disbursement this Period

1337.20
---------

Purpose of Disbursement  
Electric BillCategory/  
Type

Transaction ID : SB17.5015

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. RightOn Strategies**

Mailing Address 373 South Willow Street PMB #106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

City	State	Zip Code
Manchester	NH	03103

Amount of Each Disbursement this Period

2887.00
---------

Purpose of Disbursement  
Phone consulting servicesCategory/  
Type

Transaction ID : SB17.4964

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Right On Strategies**

Mailing Address 373 South Willow Street PMB #106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Manchester	NH	03103

Amount of Each Disbursement this Period

2887.00
---------

Purpose of Disbursement  
PhonesCategory/  
Type

Transaction ID : SB17.5014

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

7111.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. SCM Associates**

Mailing Address 1283 Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2014

City	State	Zip Code
Dublin	NH	03444

Amount of Each Disbursement this Period

2014	17719.00
------	----------

Purpose of Disbursement  
Direct Mail**Transaction ID : SB17.5012**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chris Shannon**

Mailing Address 1 Naro Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
Northport	NY	11768

Amount of Each Disbursement this Period

2014	3000.00
------	---------

Purpose of Disbursement  
Staff Consulting Fee**Transaction ID : SB17.5037**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Chris Shannon**

Mailing Address 1 Naro Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

City	State	Zip Code
Northport	NY	11768

Amount of Each Disbursement this Period

2014	234.31
------	--------

Purpose of Disbursement  
reimbursement**Transaction ID : SB17.5036**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

20953.31



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Chris Shannon**

Mailing Address 1 Naro Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2014

City	State	Zip Code
Northport	NY	11768

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Staff Consulting Fee**Transaction ID : SB17.5035**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Chris Shannon**

Mailing Address 1 Naro Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Northport	NY	11768

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Staff Consulting Fee**Transaction ID : SB17.5034**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

375.78
--------

Purpose of Disbursement  
Office supplies/stamps**Transaction ID : SB17.4925**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

6375.78

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

50.27
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4931

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

237.27
--------

Purpose of Disbursement  
Office supplies/stampsCategory/  
Type

Transaction ID : SB17.4932

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

4.33
------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4933

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

291.87

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 90

<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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

86.87
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type**Transaction ID : SB17.4937**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

43.44
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type**Transaction ID : SB17.4939**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

35.84
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type**Transaction ID : SB17.4940**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

166.15

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

55.38
-------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4941

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

215.89
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4951

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

109.86
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4955

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

381.13

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2014

Amount of Each Disbursement this Period

114.66
--------

Transaction ID : SB17.4962

**B. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

140.60
--------

Transaction ID : SB17.4965

**C. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

Amount of Each Disbursement this Period

85.50
-------

Transaction ID : SB17.4970

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

340.76

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

303.75
--------

Transaction ID : SB17.4978

**B. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2014

Amount of Each Disbursement this Period

40.05
-------

Transaction ID : SB17.4981

**C. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

121.20
--------

Transaction ID : SB17.4982

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

465.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 90

<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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

348.99
--------

Transaction ID : SB17.4983

**B. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

6.52
------

Transaction ID : SB17.4984

**C. Staples**

Mailing Address 2100 Nesconset Highway

City	State	Zip Code
Lake Grove	NY	11790

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

Amount of Each Disbursement this Period

106.21
--------

Transaction ID : SB17.4985

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

348.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

171.35
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4986

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

195.50
--------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4987

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

5.53
------

Purpose of Disbursement  
Office suppliesCategory/  
Type

Transaction ID : SB17.4988

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

372.38



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2100 Nesconset Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

City	State	Zip Code
Lake Grove	NY	11790

Amount of Each Disbursement this Period

175.36
--------

Purpose of Disbursement  
Office supplies/stampsCategory/  
Type

Transaction ID : SB17.4993

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. The Traz Group**

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

11443.51
----------

Purpose of Disbursement  
Direct MailCategory/  
Type

Transaction ID : SB17.5011

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. The Traz Group**

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

11443.51
----------

Purpose of Disbursement  
Direct MailCategory/  
Type

Transaction ID : SB17.5010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

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

23062.38

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. The Traz Group**

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

13113.51
----------

Purpose of Disbursement  
Direct mail

Candidate Name

Category/  
Type

Transaction ID : SB17.5009

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. The Traz Group**

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

11443.51
----------

Purpose of Disbursement  
Direct mail

Candidate Name

Category/  
Type

Transaction ID : SB17.5008

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. The Traz Group**

Mailing Address 18 Pendleton Court

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2014

City	State	Zip Code
Medford	NJ	08055

Amount of Each Disbursement this Period

11443.51
----------

Purpose of Disbursement  
Direct mail

Candidate Name

Category/  
Type

Transaction ID : SB17.5007

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Other (specify)

State: District:

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

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

36000.53
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. The Traz Group**

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2014

Amount of Each Disbursement this Period

11443.51
----------

Transaction ID : SB17.5006

**B. The Traz Group**

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2014

Amount of Each Disbursement this Period

11443.51
----------

Transaction ID : SB17.5005

**c. The Traz Group**

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement  
Direct mail

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

11443.51
----------

Transaction ID : SB17.5004

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

34330.53

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. The Traz Group**

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

Amount of Each Disbursement this Period

12492.51
----------

Transaction ID : SB17.5003

**B. The Traz Group**

Mailing Address 18 Pendleton Court

City	State	Zip Code
Medford	NJ	08055

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2014

Amount of Each Disbursement this Period

11443.51
----------

Transaction ID : SB17.5002

**C. Kevin Tschirhart**

Mailing Address 3 drake place

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement  
Campaign Management Consulting/reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2014

Amount of Each Disbursement this Period

8732.00
---------

Transaction ID : SB17.5023

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

32668.02

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Kevin Tschirhart**

Mailing Address 3 drake place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		08		2014

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement  
Campaign Management Consulting

Amount of Each Disbursement this Period

8000.00
---------

**Transaction ID : SB17.5022**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Kevin Tschirhart**

Mailing Address 3 drake place

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2014

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement  
reimbursement

Amount of Each Disbursement this Period

493.72
--------

**Transaction ID : SB17.5024**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

City	State	Zip Code
Lake Grove	NY	11755

Purpose of Disbursement  
Postage

Amount of Each Disbursement this Period

50.00
-------

**Transaction ID : SB17.4999**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

8543.72

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

Friends of George Demos

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

70.00
-------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : SB17.5000

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

100.00
--------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : SB17.4998

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

200.00
--------

Purpose of Disbursement  
PostageCategory/  
Type

Transaction ID : SB17.4997

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

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

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

370.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
PostageCategory/  
Type**Transaction ID : SB17.4996**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 1001 Hawkins Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

City	State	Zip Code
Lake Grove	NY	11755

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
PostageCategory/  
Type**Transaction ID : SB17.4995**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**c. Matt Varvaro**

Mailing Address 80 Soundview Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

City	State	Zip Code
Port Washington	NY	11050

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Staff Consulting FeeCategory/  
Type**Transaction ID : SB17.5019**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

3800.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 90

<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

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)

**Friends of George Demos**

Full Name (Last, First, Middle Initial)

**A. Matt Varvaro**

Mailing Address 80 Soundview Drive

City	State	Zip Code
Port Washington	NY	11050

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2014

Amount of Each Disbursement this Period

343.27
--------

Transaction ID : SB17.5020

**B. Matt Varvaro**

Mailing Address 80 Soundview Drive

City	State	Zip Code
Port Washington	NY	11050

Purpose of Disbursement  
Staff Consulting Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.5018

**C. William Ware and Associates**

Mailing Address 311 East 72nd Street

City	State	Zip Code
New York	NY	10021

Purpose of Disbursement  
Tele Town Halls and Robo Calls

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2014

Amount of Each Disbursement this Period

9884.92
---------

Transaction ID : SB17.4994

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

13228.19

943850.91



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 89 OF 90

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4100

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

George G Demos

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
09 / 27 / 2013M M / D D / Y Y Y Y  
 / / noneM M / D D / Y Y Y Y  
 / / noneM M / D D / Y Y Y Y  
 / / none

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. 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)..... ►

1000000.00

**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 90 OF 90

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4495

Friends of George Demos

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

George G Demos

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M

D 30 D

Y 2013 Y

M M

D D

Y none Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. 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)..... ►

1000000.00

**TOTALS** This Period (last page in this line only)..... ►

2000000.00

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