

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Zeldin For Congress

ADDRESS (number and street)

47 Flintlock Drive

Check if different than previously reported. (ACC)

Shirley

NY

11967

2. FEC IDENTIFICATION NUMBER ▼

C C00552547

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NY

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY  
11 / 04 / 2014

DD / YYYY

YYYY

in the State of

NY

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

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

DD / YYYY

YYYY

in the State of

5. Covering Period

MM / DD / YYYY  
04 / 01 / 2014

DD / YYYY

YYYY

through

MM / DD / YYYY  
06 / 04 / 2014

DD / YYYY

YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Marks

Signature of Treasurer Nancy Marks

[Electronically Filed]

Date

MM / DD / YYYY  
06 / 12 / 2014

DD / YYYY

YYYY

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

Write or Type Committee Name  
**Zeldin For Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 04 / 2014

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 131420.32               | 734592.18                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 131420.32               | 734592.18                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 392556.84               | 584982.62                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 392556.84               | 584982.62                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 149609.56               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Zeldin For Congress**

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

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 107716.82                             | 611372.20                                  |
| (ii) Unitemized.....   | 21103.50                              | 62787.81                                   |
| (iii) TOTAL of contributions from individuals ▶  | 128820.32                             | 674160.01                                  |
| (b) Political Party Committees.....  | 0.00                                  | 11056.80                                   |
| (c) Other Political Committees (such as PACs).....   | 2600.00                               | 49375.37                                   |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 131420.32                             | 734592.18                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                                  | 0.00                                       |
| (b) All Other Loans.....   | 0.00                                  | 0.00                                       |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                                  | 0.00                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 0.00                                       |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>  | 0.00                                  | 0.00                                       |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 131420.32                             | 734592.18                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 392556.84                     | 584982.62                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 392556.84                     | 584982.62                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 410746.08 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 131420.32 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 542166.40 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 392556.84 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 149609.56 |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 5 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**1 Christopher Realty LLC**

Mailing Address **One Christopher Street**

City **New York** State **NY** Zip Code **10014**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : SA11AI.7482**

Amount of Each Receipt this Period  
**1000.00**  
 Single owner LLC

**B.** Full Name (Last, First, Middle Initial)  
**Laura Ahearn**

Mailing Address **18 Balfour Lane**

City **Stony Brook** State **NY** Zip Code **11790**

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

Name of Employer Occupation  
**PFML/CVC Executive Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 10 / 2014**

**Transaction ID : SA11AI.7572**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Farhad Azima**

Mailing Address **5921 Ward Parkway**

City **Kansas City** State **MT** Zip Code **64113**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : SA11AI.7438**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2500.00**

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 6 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 50 Meritoria Dr

City East Williston State NY Zip Code 11596

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

Name of Employer S & D Real Estate Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11A1.7408**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Balistreri**

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

Name of Employer Suffolk County Sheriff's Offic Occupation Deputy Sheriff

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 10 / 2014

**Transaction ID : SA11A1.7551**

Amount of Each Receipt this Period  
 125.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Balistreri**

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

Name of Employer Suffolk County Sheriff's Offic Occupation Deputy Sheriff

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : SA11A1.7678**

Amount of Each Receipt this Period  
 14.00

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

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

639.00

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 7 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Balistreri**

Mailing Address P.O. Box 205

City Medford State NY Zip Code 11763

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

Name of Employer Suffolk County Sheriff's Office Occupation Deputy Sheriff

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **316.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : SA11AI.8497**

Amount of Each Receipt this Period  
**35.00**

**B.** Full Name (Last, First, Middle Initial)  
**Ryan Betters**

Mailing Address 549 East 11th St Apt# C-2

City New York State NY Zip Code 10009

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

Name of Employer Self Employed Occupation International Business

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 15 / 2014**

**Transaction ID : SA11AI.7341**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 7 Patricks Way

City St James State NY Zip Code 11780

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

Name of Employer Professional Group Plans Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : SA11AI.7662**

Amount of Each Receipt this Period  
**150.00**

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

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

**1185.00**

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony Calabrese**

Mailing Address 181 Grand St

City State Zip Code  
New York NY 10013

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : SA11AI.7457**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Joyce Campbell**

Mailing Address 125 Broad St

City State Zip Code  
New York NY 10004

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.7432**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John Caracciolo**

Mailing Address 3075 Veterans Hwy  
Suite 201

City State Zip Code  
Ronkonkoma NY 11779

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

Name of Employer Occupation  
JVC Broadcasting President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2150.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2014

**Transaction ID : SA11AI.7447**

Amount of Each Receipt this Period  
2000.00

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

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

4000.00



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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 9 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Catsimatidis**

Mailing Address 817 Fifth Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Big Apple President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7384**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Margo Catsimatidis**

Mailing Address 817 Fifth Avenue

City State Zip Code  
New York NY 10021

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  
 04 / 22 / 2014

**Transaction ID : SA11AI.8700**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**John Catsimatidis Jr**

Mailing Address 817 Fifth Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Student Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7430**

Amount of Each Receipt this Period  
 500.00

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

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

5700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 10 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Cervellino**

Mailing Address 10 Burham Ct

City State Zip Code  
Smithtown NY 11787

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 12 / 2014**

**Transaction ID : SA11AI.7560**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jeremy Chess**

Mailing Address P.O. Box 529

City State Zip Code  
Yonkers NY 10704

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

Name of Employer Occupation  
Jeremy Chess M.D. Physician

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 / 02 / 2014**

**Transaction ID : SA11AI.8608**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Clifford Clark**

Mailing Address P.O. Box 614

City State Zip Code  
Shelter Island NY 11964

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : SA11AI.8105**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 11 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Colucci**

Mailing Address 7 Bradley Ln.

City East Moriches State NY Zip Code 11940

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 10 / 2014**

**Transaction ID : SA11AI.7573**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Rex Crandall**

Mailing Address 1335 East Anasazi St

City Mesa State AZ Zip Code 85203

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

Name of Employer State of Wyoming Dept of EDU Occupation 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  
**04 / 12 / 2014**

**Transaction ID : SA11AI.7399**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 61 Avenue B

City Kings Park State NY Zip Code 11754

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

Name of Employer Town of Smithtown Occupation Councilman

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 / 21 / 2014**

**Transaction ID : SA11AI.7656**

Amount of Each Receipt this Period  
**300.00**

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

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

**900.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 94 |
|   | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carlos Curbelo**

Mailing Address 8770 Sunset Drive  
#355

City Miami State FL Zip Code 33173

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

Name of Employer Capitol Gains Occupation Principal

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 / 23 / 2014

**Transaction ID : SA11AI.7473**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**CVR First LLC**

Mailing Address 399 West John St

City Hicksville State NY Zip Code 11801

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 08 / 2014

**Transaction ID : SA11AI.7622**

Amount of Each Receipt this Period  
250.00

Single Owner LLC

**C.** Full Name (Last, First, Middle Initial)  
**Alexander Damianos**

Mailing Address One Meadow Gate East

City Head of the Harbor State NY Zip Code 11780

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

Name of Employer Student Occupation Student

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1164.80

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : SA11AI.8684**

Amount of Each Receipt this Period  
1164.80

In-kind - June Rent

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

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

1664.80

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 13 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. John Damianos</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014 |
| Mailing Address 14 Blueberry Ridge Road   |                                   | <b>Transaction ID : SA11AI.8678</b>                      |
| City<br>Setauket  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1376.33            |
| Name of Employer<br>Bonvi Realty Inc  | Occupation<br>Property Manager    | In-kind - Rent   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2752.66 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Markella Damianos</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address One Meadow Gate East  |                                   | <b>Transaction ID : SA11AI.8680</b>                      |
| City<br>Head of the Harbor  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1164.80            |
| Name of Employer<br>None  | Occupation<br>Student             | In-kind - April Rent                                     |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3494.40 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Markella Damianos</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014 |
| Mailing Address One Meadow Gate East  |                                   | <b>Transaction ID : SA11AI.8682</b>                      |
| City<br>Head of the Harbor  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1164.80            |
| Name of Employer<br>None  | Occupation<br>Student             | In-kind - May Rent                                       |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>4659.20 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3705.93 |
| <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: (check only one)  | PAGE 14 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**DBA Matrix Equities**

Mailing Address 1201 Route 112

City State Zip Code  
Port Jefferson Station NY 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

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 16 / 2014

**Transaction ID : SA11AI.7608**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 140 East 56th St  
Apt 15C

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Everpoint Asset Management Financial Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7391**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 295 Broadway

City State Zip Code  
Huntington Station NY 11746

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

Name of Employer Occupation  
Mainline Electric Electrician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : SA11AI.7502**

Amount of Each Receipt this Period  
 60.00

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

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

810.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 15 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Alfred Eckert III**

Mailing Address 200 East 94th St

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Phoenix Star Capital CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.7455**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Lynda Edwards**

Mailing Address P.O. Box 543

City State Zip Code  
Amagansett NY 11930

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  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 15 / 2014

**Transaction ID : SA11AI.7343**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Lynda Edwards**

Mailing Address P.O. Box 543

City State Zip Code  
Amagansett NY 11930

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  
550.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2014

**Transaction ID : SA11AI.7925**

Amount of Each Receipt this Period  
200.00

**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: (check only one)  | PAGE 16 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                      |  |
|---|----------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Stephen Erenberg</b>   |                      | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 28 / 2014 |
| Mailing Address 36 Ridge St<br>Floor 2  |                      | <b>Transaction ID : SA11AI.8051</b>                          |
| City<br>Katonah   | State<br>NY          |  |
| FEC ID number of contributing federal political committee.<br>C   |                      | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>Self Employed Sent letter   | Occupation<br>Trader | Election Cycle-to-Date<br>2600.00                            |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                      |  |

|   |                      |  |
|---|----------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Stephen Erenberg</b>   |                      | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 28 / 2014 |
| Mailing Address 36 Ridge St<br>Floor 2  |                      | <b>Transaction ID : SA11AI.8053</b>                          |
| City<br>Katonah   | State<br>NY          |  |
| FEC ID number of contributing federal political committee.<br>C   |                      | Amount of Each Receipt this Period<br>2400.00                |
| Name of Employer<br>Self Employed Sent letter   | Occupation<br>Trader | Election Cycle-to-Date<br>5000.00                            |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                      |  |

|   |                          |  |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Megan Foran</b>  |                          | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 22 / 2014 |
| Mailing Address 449 East 14th St<br>Apt 11C   |                          | <b>Transaction ID : SA11AI.7378</b>                          |
| City<br>New York  | State<br>NY              |  |
| FEC ID number of contributing federal political committee.<br>C   |                          | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>Self Employed- Sent letter  | Occupation<br>Consultant | Election Cycle-to-Date<br>250.00                             |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5250.00 |
| <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: (check only one)  | PAGE 17 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address **1 Brewster Court**

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

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : SA11AI.8306**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **47 Van Buren Street**

City **Port Jefferson Station** State **NY** Zip Code **11776**

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

Name of Employer **PLG, LLP** Occupation **CPA**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 01 / 2014**

**Transaction ID : SA11AI.8084**

Amount of Each Receipt this Period  
**60.00**

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

Mailing Address **100 Lincoln Ave**

City **Holbrook** State **NY** Zip Code **11741**

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

Name of Employer **Crestwood Metal Corp** Occupation **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.7543**

Amount of Each Receipt this Period  
**250.00**

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

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

**810.00**

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 18 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Lawrence Graev</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 21 / 2014 |
| Mailing Address 767 Third Ave   |                                   | <b>Transaction ID : SA11AI.7467</b>                          |
| City<br>New York  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00                |
| Name of Employer<br>The Glen Rock Group LLC   | Occupation<br>Attorney            |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Howard Greenberg</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 02 / 2014 |
| Mailing Address 2 Grill Drive   |                                  | <b>Transaction ID : SA11AI.7356</b>                          |
| City<br>St James  | State<br>NY                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>100.00                 |
| Name of Employer<br>Howard E Greenberg Atty At Law  | Occupation<br>Attorney           |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>400.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Howard Greenberg</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>06 / 01 / 2014 |
| Mailing Address 2 Grill Drive   |                                  | <b>Transaction ID : SA11AI.8042</b>                          |
| City<br>St James  | State<br>NY                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>60.00                  |
| Name of Employer<br>Howard E Greenberg Atty At Law  | Occupation<br>Attorney           |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>460.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1160.00 |
| <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: (check only one)   | PAGE 19 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Greenberg**

Mailing Address 119 Hamlet Dr

City State Zip Code  
Mt Sinai NY 11766

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
216.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2014

**Transaction ID : SA11A1.7602**

Amount of Each Receipt this Period  
216.00

**B.** Full Name (Last, First, Middle Initial)  
**Martin Greenberg**

Mailing Address One North End Ave  
Suite 1117

City State Zip Code  
New York NY 10282

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

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

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 : SA11A1.7618**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Charles Grinnell**

Mailing Address 56 Fort Ave

City State Zip Code  
Seaside Heights NY 08651

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

Name of Employer Occupation  
DOD Office

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 / 27 / 2014

**Transaction ID : SA11A1.7686**

Amount of Each Receipt this Period  
500.00

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

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

1716.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 20 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jean Claude Gruffat**

Mailing Address 923 5th Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Citigroup Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.7323**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jay Hatfield**

Mailing Address 2373 Broadway Apt 1927

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Infrastrure Capital Management CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 10 / 2014

**Transaction ID : SA11AI.7376**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 7 Richard Path

City State Zip Code  
St James NY 11780

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

Name of Employer Occupation  
Lawrence Worden Rainis & Bard Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2014

**Transaction ID : SA11AI.7629**

Amount of Each Receipt this Period  
300.00

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

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

3900.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 21 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vanessa Herman**

Mailing Address 237 Middle Island Road

City Medford State NY Zip Code 11763

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

Name of Employer Pace University Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : SA11AI.8060**

Amount of Each Receipt this Period  
 60.00

Amount of Each Receipt this Period  
 560.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Herz**

Mailing Address 63 Hunting Hill Drive

City Dix Hills State NY Zip Code 11746

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

Name of Employer Sterling Floors Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : SA11AI.7674**

Amount of Each Receipt this Period  
 250.00

Amount of Each Receipt this Period  
 1250.00

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Hogue**

Mailing Address Dering Harbor

City Shelter Island State NY Zip Code 11965

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : SA11AI.8107**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

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

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

1310.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 22 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Hullin**

Mailing Address 55 Strimples Mill Rd

City Stockton State NJ Zip Code 08559

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

Name of Employer Self Employed--Letter Sent Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7395**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tod Hullin**

Mailing Address 55 Strimples Mill Rd

City Stockton State NJ Zip Code 08559

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

Name of Employer Self Employed--Letter Sent Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7393**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**James Jacobs**

Mailing Address 5 Forest Park Dr

City Farmington State CT Zip Code 06032

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

Name of Employer JWJ Advisors Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 14 / 2014

**Transaction ID : SA11AI.7420**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 23 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 47 Doral Lane

City Bayshore State NY Zip Code 11706

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

Name of Employer Self Employed--Letter Sent Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 23 / 2014**

**Transaction ID : SA11AI.7668**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Johnston**

Mailing Address 354 Glenmore Lane

City Bayport State NY Zip Code 11705

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

Name of Employer Precision Transportation Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 15 / 2014**

**Transaction ID : SA11AI.7344**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Elaine Kahl**

Mailing Address 157 Warfield Way

City Southampton State NY Zip Code 11968

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 / 28 / 2014**

**Transaction ID : SA11AI.7927**

Amount of Each Receipt this Period  
**100.00**

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

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

**850.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 24 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leo Kayser**

Mailing Address 480 Park Ave

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Leo Kayser ESQ 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 Y Y  
 04 / 23 / 2014

**Transaction ID : SA11AI.7445**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Kirchofer**

Mailing Address 27 Orchid St

City State Zip Code  
Floral Park NY 11001

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

Name of Employer Occupation  
NY City FDNY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : SA11AI.8321**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Katharine Knott**

Mailing Address 232 Cleft Road

City State Zip Code  
Mill Neck NY 11765

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

Name of Employer Occupation  
None Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11AI.7496**

Amount of Each Receipt this Period  
2600.00

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

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

3850.00



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

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

FOR LINE NUMBER: PAGE 25 OF 94  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Katharine Knott**

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11AI.7498**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**David Knott Jr**

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11AI.7499**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**David Knott Jr**

Mailing Address 232 Cleft Road

City Mill Neck State NY Zip Code 11765

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : SA11AI.7501**

Amount of Each Receipt this Period  
2600.00

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

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

7800.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 26 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>David Koch</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 21 / 2014 |
| Mailing Address 667 Madison Ave<br>22nd Floor   |                                   | <b>Transaction ID : SA11AI.7477</b>                          |
| City<br>New York  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>Intrust Wealth Management   | Occupation<br>Owner               |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2600.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>David Koch</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 21 / 2014 |
| Mailing Address 667 Madison Ave<br>22nd Floor   |                                   | <b>Transaction ID : SA11AI.7479</b>                          |
| City<br>New York  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2600.00                |
| Name of Employer<br>Intrust Wealth Management   | Occupation<br>Owner               |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Pouya Lavian</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 27 / 2014 |
| Mailing Address 301 East 45th Street Apt 15D  |                                   | <b>Transaction ID : SA11AI.7428</b>                          |
| City<br>New York  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>J.P. Morgan   | Occupation<br>Financial Services  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5700.00 |
| <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: (check only one)  | PAGE 27 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Debra Leible</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 22 / 2014 |
| Mailing Address 9 west 64th Street, 6F  |  | <b>Transaction ID : SA11AI.7429</b>                          |
| City<br>New York  | State<br>NY                                  | Zip Code<br>10023  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>250.00 |  |
| Name of Employer<br>NYC Board of Elections  | Occupation<br>EDO Coordinator                |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>350.00             |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>Elizabeth Levy</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>04 / 15 / 2014 |
| Mailing Address 200 East 65th Street  |   | <b>Transaction ID : SA11AI.7375</b>                          |
| City<br>New York  | State<br>NY                                   | Zip Code<br>10065  |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>1000.00 |  |
| Name of Employer<br>Grammies World of Toys  | Occupation<br>Marketing                       |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>4600.00             |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Wayne Losee</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 26 / 2014 |
| Mailing Address 21 Crescent Street  |  | <b>Transaction ID : SA11AI.8115</b>                          |
| City<br>Yaphank   | State<br>NY                                  | Zip Code<br>11980-9707                                       |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>250.00 |  |
| Name of Employer<br>Info letter sent-Requested  | Occupation<br>Info letter sent-Requested     |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>350.00             |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1500.00 |
| <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: (check only one)  | PAGE 28 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Jack Louro</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 22 / 2014 |
| Mailing Address 2 Hunters Way   |  | <b>Transaction ID : SA11AI.7663</b>                          |
| City<br>Nissequogue   | State<br>NY                              |  |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>300.00                 |
| Name of Employer<br>Sent Letter Requested Info  | Occupation<br>Sent Letter Requested Info |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>300.00         |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Thomas Maloney</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 24 / 2014 |
| Mailing Address 108 Lynn Ave  |                                   | <b>Transaction ID : SA11AI.7926</b>                          |
| City<br>Hampton Bays  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00                |
| Name of Employer<br>Shinnecock Hardware   | Occupation<br>Owner               |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Thomas Maloney</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>05 / 26 / 2014 |
| Mailing Address 108 Lynn Ave  |                                   | <b>Transaction ID : SA11AI.7684</b>                          |
| City<br>Hampton Bays  | State<br>NY                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>Shinnecock Hardware   | Occupation<br>Owner               |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1800.00 |
| <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:<br>(check only one)   | PAGE 29 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anita Manghisi**

Mailing Address **24 Railroad Avenue**

City **Patchogue** State **NY** Zip Code **11772**

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

Name of Employer **Independent Recovery Resources** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : SA11AI.7904**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Christopher March**

Mailing Address **Left message for info**

City State Zip Code

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

Name of Employer **Info Requested Left Message** Occupation **Info Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 22 / 2014**

**Transaction ID : SA11AI.7426**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Donna Marder**

Mailing Address **47 Searingtown Rd**

City **Albertson** State **NY** Zip Code **11507**

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2014**

**Transaction ID : SA11AI.7401**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 30 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 600 Route 25A

City East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Tech Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : SA11AI.7561**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Mercer**

Mailing Address 600 Route 25A

City East Setauket State NY Zip Code 11733

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

Name of Employer Renaissance Tech Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : SA11AI.7563**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**John Mercurio Jr**

Mailing Address 520 Wolf Hill Rd

City Dix Hills State NY Zip Code 11746

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : SA11AI.7403**

Amount of Each Receipt this Period  
 250.00

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

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

5450.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MORE CONSERVATIVES PAC (MCPAC)**

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : SA11AI.7921**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Murphy**

Mailing Address 200 Atlantic Avenue

City State Zip Code  
Blue Point NY 11715

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : SA11AI.8097**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Nesenger**

Mailing Address 2096 Medford Ave

City State Zip Code  
Medford NY 11763

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

Name of Employer Occupation  
112 Nesenger Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.7316**

Amount of Each Receipt this Period  
 1000.00

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

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

2100.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 32 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Odle Jr**

Mailing Address 476 South Union St

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Weil, Golshal & Manges LLP Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7424**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Salvatore Paterno**

Mailing Address 9 Springmeadow Dr

City State Zip Code  
Kings Park NY 11754

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : SA11AI.7416**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joann Petosa**

Mailing Address 14 Jagger Ct.

City State Zip Code  
Melville NY 11747

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
220.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : SA11AI.7667**

Amount of Each Receipt this Period  
120.00

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

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

2970.00



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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 33 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Donald Pius</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 14 / 2014 |  |
| Mailing Address 794 Fort Salonga Road   |  | <b>Transaction ID : SA11AI.7569</b>                      |  |
| City Northport  | State NY                               | Zip Code 11768   | Amount of Each Receipt this Period<br>_____ 250.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>_____ 550.00       |  |
| Name of Employer Pius Realty  | Occupation Owner/Real Estate Investor  |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 550.00 |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Vincent Puleo</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 20 / 2014 |  |
| Mailing Address 202 Smithtown Blvd  |  | <b>Transaction ID : SA11AI.7655</b>                      |  |
| City Nesconset  | State NY                               | Zip Code 11767   | Amount of Each Receipt this Period<br>_____ 150.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>_____ 450.00       |  |
| Name of Employer Town of Smithtown  | Occupation Town Clerk                  |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 450.00 |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. R &amp; R Property Management LLC</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 13 / 2014 |  |
| Mailing Address P.O. Box 502  |  | <b>Transaction ID : SA11AI.7584</b>                      |  |
| City Bohemia  | State NY                               | Zip Code 11716   | Amount of Each Receipt this Period<br>_____ 250.00 |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>_____ 750.00       |  |
| Name of Employer  | Occupation                             |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 750.00 |  |  |

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | _____ 650.00 |
| <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: (check only one)  | PAGE 34 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Rettner**

Mailing Address 374 Mclean Ave

City State Zip Code  
Yonkers NY 10705

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

Name of Employer Occupation  
Rettner Management Corp Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 22 / 2014

**Transaction ID : SA11AI.7397**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 2 Scotts Cove Lane

City State Zip Code  
Setauket NY 11733

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

Name of Employer Occupation  
Cella Bagels Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : SA11AI.7320**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**Jodi Rosenthal**

Mailing Address 1887 Muttontown Road

City State Zip Code  
Muttontown NY 11791

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.7469**

Amount of Each Receipt this Period  
2600.00

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

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

5250.00

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 35 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 1887 Muttontown Rd

City Muttontown State NY Zip Code 11791

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

Name of Employer: First Long Island Investors Occupation: Wealth Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 04 / 21 / 2014

**Transaction ID : SA11AI.7472**

Amount of Each Receipt this Period: 2600.00

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

Mailing Address 90 Merrivale Road

City Great Neck State NY Zip Code 11020

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

Name of Employer: NYU Langone Medical Center Occupation: Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 04 / 04 / 2014

**Transaction ID : SA11AI.7407**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Sabin**

Mailing Address One North End Ave Suite 1231

City New York State NY Zip Code 10282

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

Name of Employer: Sabin Metal Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 06 / 03 / 2014

**Transaction ID : SA11AI.8610**

Amount of Each Receipt this Period: 2600.00

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

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

5450.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 36 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                   |  |   |
|---|-----------------------------------|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andrew Sabin</b>   |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 03 / 2014 |   |
| Mailing Address One North End Ave<br>Suite 1231   |                                   | <b>Transaction ID : SA11AI.8612</b>                      |   |
| City<br>New York  | State<br>NY                       | Zip Code<br>10282  | Amount of Each Receipt this Period<br>2600.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                   |  |   |
| Name of Employer<br>Sabin Metal   | Occupation<br>President           |  |   |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00 |  |   |

|   |                                  |  |   |
|---|----------------------------------|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Frederick Schlomann</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014 |   |
| Mailing Address 237 Old Willets Path  |                                  | <b>Transaction ID : SA11AI.8688</b>                      |   |
| City<br>Smithtown   | State<br>NY                      | Zip Code<br>11787  | Amount of Each Receipt this Period<br>923.04<br>In-kind - Mailing Expenses Paid |
| FEC ID number of contributing federal political committee.<br>C   |                                  |  |   |
| Name of Employer<br>Retired   | Occupation<br>Retired            |  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>987.04 |  |   |

|   |                                   |  |   |
|---|-----------------------------------|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Susan Schlomann</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014 |   |
| Mailing Address 237 Old Willets Path  |                                   | <b>Transaction ID : SA11AI.8690</b>                      |   |
| City<br>Smithtown   | State<br>NY                       | Zip Code<br>11787  | Amount of Each Receipt this Period<br>923.05<br>In-kind - Mailing Expenses Paid |
| FEC ID number of contributing federal political committee.<br>C   |                                   |  |   |
| Name of Employer<br>Unemployed  | Occupation<br>Unemployed          |  |   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1037.05 |  |   |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4446.09     |
| <b>TOTAL</b> This Period (last page this line number only)..... | [Empty Box] |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 37 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Schmeltzer III**

Mailing Address 21 Hawkwood Lane

City State Zip Code  
Greenwich CT 06830

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

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

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 / 22 / 2014

**Transaction ID : SA11AI.7487**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Gail Shapiro**

Mailing Address 62 Sackett St

City State Zip Code  
Hicksville NY 11801

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.7436**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Herbert Siegel**

Mailing Address 55 East 59th St  
Suite 22B

City State Zip Code  
New York NY 10022

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2014

**Transaction ID : SA11AI.7422**

Amount of Each Receipt this Period  
2000.00

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

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

4250.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 38 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 35 Split Rock Dr

City Kings Point State NY Zip Code 11024

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

Name of Employer Lifetime Brands Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : SA11AI.7911**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Silberman**

Mailing Address 25 Ely Rd

City Holmoel State NJ Zip Code 07733

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

Name of Employer SMS Engineering Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : SA11AI.8056**

Amount of Each Receipt this Period  
 400.00

**C.** Full Name (Last, First, Middle Initial)  
**John Simmons**

Mailing Address 9616 Tackroom lane

City Great Falls State VA Zip Code 22066

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

Name of Employer The Rossevelt Group Occupation Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : SA11AI.7504**

Amount of Each Receipt this Period  
 250.00

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

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

1150.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 39 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R Bram Smith**

Mailing Address 14 Brook Hills Circle

City State Zip Code  
White Plains NY 10605

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

Name of Employer Occupation  
Lsta ED

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 / 16 / 2014

**Transaction ID : SA11AI.7512**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Cathy Soref**

Mailing Address 10 Stoddart Ct

City State Zip Code  
Locust Valley NY 11560

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : SA11AI.7434**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joan Soviero**

Mailing Address 24 Gaul Road South

City State Zip Code  
East Setauket NY 11733

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : SA11AI.7594**

Amount of Each Receipt this Period  
250.00

**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: (check only one)   | PAGE 40 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Joan Soviero</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 01 / 2014 |  |
| Mailing Address 24 Gaul Road South  |   | <b>Transaction ID : SA11AI.8092</b>                      |  |
| City<br>East Setauket   | State<br>NY                               | Zip Code<br>11733  |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>60.00              |  |
| Name of Employer<br>Requested Info--Letter Sent   | Occupation<br>Requested Info--Letter Sent |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>660.00          |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Pete Stavrakoglou</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 01 / 2014 |  |
| Mailing Address 40 Sahdyview Crossing   |                                  | <b>Transaction ID : SA11AI.8054</b>                      |  |
| City<br>Manorville  | State<br>NY                      | Zip Code<br>11949  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>160.00             |  |
| Name of Employer<br>Aperio CL   | Occupation<br>Data Analyst       |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>210.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. James Sutton</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 09 / 2014 |  |
| Mailing Address 143 East Main St  |                                  | <b>Transaction ID : SA11AI.7582</b>                      |  |
| City<br>East Islip  | State<br>NY                      | Zip Code<br>11730  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00             |  |
| Name of Employer<br>James F Sutton Agency   | Occupation<br>Insurance Agent    |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 470.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 470.00 |



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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 41 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 140 Albemarle Rd

City State Zip Code  
White Plains NY 10605

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

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

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 / 16 / 2014

**Transaction ID : SA11AI.7380**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Tanzi**

Mailing Address 16 Brand St.

City State Zip Code  
Kings Park NY 11754

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

Name of Employer Occupation  
Indian Head Contracting Inc. Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2014

**Transaction ID : SA11AI.7628**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Tems**

Mailing Address P.O. Box 276

City State Zip Code  
Jamison PA 18929

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  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2014

**Transaction ID : SA11AI.7510**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 42 OF 94  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

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

Mailing Address 1172 Park Ave  
Apt 3A

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Brookstone Partners Private Equity

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : SA11AI.7493**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1172 Park Ave  
Apt 3A

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Brookstone Partners Private Equity

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2014

**Transaction ID : SA11AI.7495**

Amount of Each Receipt this Period  
 5200.00

**C.** Full Name (Last, First, Middle Initial)  
**Tsunis Gasparis Lustig Ring & Kenney LLP**

Mailing Address 2929 Expressway Drive

City State Zip Code  
Islandia NY 11749

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2014

**Transaction ID : SA11AI.7483**

Amount of Each Receipt this Period  
 1000.00  
 Partnership

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

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

6200.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 43 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Tsunis**

Mailing Address 801 Motor Pkwy

City Hauppauge State NY Zip Code 11788

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

Name of Employer Tunis Gasparis Lustig Ring etl 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  
 04 / 16 / 2014

**Transaction ID : SA11AI.7483.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Tucker**

Mailing Address 230 Park Ave Suite 440

City New York State NY Zip Code 10169

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

Name of Employer T & M Protection Resources Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : SA11AI.7480**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 63 Autumn Ridge Rd

City Pound Ridge State NY Zip Code 10576

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

Name of Employer GFI Group Occupation Corporate Bond Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : SA11AI.7327**

Amount of Each Receipt this Period  
500.00

**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: (check only one)  | PAGE 44 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Frank Volz</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 28 / 2014 |  |
| Mailing Address 1537 13th Street  |                                  | <b>Transaction ID : SA11AI.8116</b>                      |  |
| City<br>West Babylon  | State<br>NY                      | Zip Code<br>11704  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>30.00              |  |
| Name of Employer<br>South Shore Speech & Language   | Occupation<br>Physician          |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>530.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Charles Wang</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 / 22 / 2014 |  |
| Mailing Address 880 3rd Ave<br>13th Floor   |                                   | <b>Transaction ID : SA11AI.7390</b>                      |  |
| City<br>New York  | State<br>NY                       | Zip Code<br>10022  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00            |  |
| Name of Employer<br>Retired   | Occupation<br>Retired             |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>Weber Law Group LLP</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 / 15 / 2014 |  |
| Mailing Address 290 Broad Hollow Rd.<br>Suite 200 E   |                                  | <b>Transaction ID : SA11AI.7617</b>                      |  |
| City<br>Melville  | State<br>NY                      | Zip Code<br>11747-4818                                   |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>200.00             |  |
| Name of Employer  | Occupation<br>Partnership        |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>450.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1230.00 |
| <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:<br>(check only one)   | PAGE 45 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gary Weber**

Mailing Address **PO Box 158**

City **Westhampton Beach** State **NY** Zip Code **11978**

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

Name of Employer **Weber & Weber** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : SA11AI.7617.0**

Amount of Each Receipt this Period  
**200.00**

**[MEMO ITEM]**

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

Mailing Address **20 Burr Avenue**

City **Kings Park** State **NY** Zip Code **11754**

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

Name of Employer **Town of Smithtown** Occupation **Councilman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : SA11AI.7640**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**West Brookhaven Republican Club**

Mailing Address **1 Firdale St**

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  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : SA11AI.7558**

Amount of Each Receipt this Period  
**1000.00**

Monies are from permissible Funds

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

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

**1150.00**

**107716.82**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 46 OF 94 |
|   | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Paul Leszczynski**

Mailing Address P.O Box 626

City Aquebogue State NY Zip Code 11931

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2014

**Transaction ID : SA11C.7373**

Amount of Each Receipt this Period  
 100.00

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : SA11C.7597**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2600.00

2600.00

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 47 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Alitalia Pizza</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 30 / 2014                               |
| Mailing Address 532 Montauk Highway                                 |  | Amount of Each Disbursement this Period<br>137.86<br><b>Transaction ID : SB17.8644</b> |
| City Center Moriches  | State NY Zip Code 11934  |  |
| Purpose of Disbursement<br>Pizza/Soda for Volunteers                | Category/Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                        | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President               |  |
| State: NY District: 01  | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. John Alvarez</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 19 / 2014                                |
| Mailing Address 3 Grand Ave Apt#2                                 |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.7860</b> |
| City Islip  | State NY Zip Code 11722  |   |
| Purpose of Disbursement<br>Consultant                             | Category/Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                      | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President               |   |
| State: NY District: 01  | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. AmTrak</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 21 / 2014                              |
| Mailing Address 60 Massachusetts Avenue NW                  |  | Amount of Each Disbursement this Period<br>41.00<br><b>Transaction ID : SB17.8641</b> |
| City Washington   | State DC Zip Code 20002  |   |
| Purpose of Disbursement<br>Train Ticket to DC               | Category/Type<br>002   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President               |   |
| State: NY District: 01                                      | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1678.86 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 48 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Vincent Belfiore</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                |
| Mailing Address 137 Hunter Avenue  |  | Amount of Each Disbursement this Period<br>2400.00<br><b>Transaction ID : SB17.7833</b> |
| City No Babylon  | State NY Zip Code 11703  |   |
| Purpose of Disbursement<br>Campaign Salary   | Category/Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Vincent Belfiore</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2014                               |
| Mailing Address 137 Hunter Avenue  |  | Amount of Each Disbursement this Period<br>123.80<br><b>Transaction ID : SB17.7847</b> |
| City No Babylon  | State NY Zip Code 11703  |  |
| Purpose of Disbursement<br>Reimbursement for Office Expenses/Volunteers  | Category/Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014  |
| Mailing Address 999 Montauk Highway  |  | Amount of Each Disbursement this Period<br>16.27<br><b>Transaction ID : SB17.7847.3</b><br><b>[MEMO ITEM]</b> |
| City Shirley   | State NY Zip Code 11967  |   |
| Purpose of Disbursement<br>Office Supplies/Folders   | Category/Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2523.80 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 49 OF 94                      |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 999 Montauk Highway  |  | Amount of Each Disbursement this Period<br>24.97              |
| City Shirley   | State NY Zip Code 11967  |   |
| Purpose of Disbursement<br>Ink Cartridge   | Category/Type<br>001   | Transaction ID : SB17.7847.6<br><br>[MEMO ITEM]               |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Vincent Belfiore</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 28 / 2014 |
| Mailing Address 137 Hunter Avenue  |  | Amount of Each Disbursement this Period<br>2400.00            |
| City No Babylon  | State NY Zip Code 11703  |   |
| Purpose of Disbursement<br>Campaign Salary   | Category/Type<br>001   | Transaction ID : SB17.7831                                    |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Brabender Cox LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>35882.00           |
| City Pittsburgh  | State PA Zip Code 15211  |   |
| Purpose of Disbursement<br>TV/Radio  | Category/Type<br>004   | Transaction ID : SB17.7796                                    |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 38282.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 50 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Brabender Cox LLC</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address 1218 Grandview Avenue                                  |   | Amount of Each Disbursement this Period<br>7000.00<br><b>Transaction ID : SB17.7798</b> |
| City Pittsburgh State PA Zip Code 15211                                | Purpose of Disbursement Retainer for Advertising<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Brabender Cox LLC</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address 1218 Grandview Avenue                                  |   | Amount of Each Disbursement this Period<br>7000.00<br><b>Transaction ID : SB17.7799</b> |
| City Pittsburgh State PA Zip Code 15211                                | Purpose of Disbursement Retainer for Advertising<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Brabender Cox LLC</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address 1218 Grandview Avenue                                  |   | Amount of Each Disbursement this Period<br>4880.57<br><b>Transaction ID : SB17.8664</b> |
| City Pittsburgh State PA Zip Code 15211                                | Purpose of Disbursement TV/Radio<br>004<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18880.57 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 51 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Brabender Cox LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 02 / 2014                               |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.7797</b> |
| City<br>Pittsburgh   | State<br>PA  |  |
| Zip Code<br>15211  | Purpose of Disbursement<br>Web Video   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Brabender Cox LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 09 / 2014                                |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>2652.00<br><b>Transaction ID : SB17.8665</b> |
| City<br>Pittsburgh   | State<br>PA  |   |
| Zip Code<br>15211  | Purpose of Disbursement<br>TV/Radio  | Category/<br>Type<br>004  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Brabender Cox LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 16 / 2014                                |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>7000.00<br><b>Transaction ID : SB17.7742</b> |
| City<br>Pittsburgh   | State<br>PA  |   |
| Zip Code<br>15211  | Purpose of Disbursement<br>Retainer for Advertising  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 10152.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 52 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Brabender Cox LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2014                            |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>38022.00<br><b>Transaction ID : SB17.7762</b> |
| City<br>Pittsburgh   | State<br>PA  |  |
| Zip Code<br>15211  | Purpose of Disbursement<br>TV/Radio  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Brabender Cox LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 22 / 2014                           |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>3900.00<br><b>Transaction ID : SB17.8666</b> |
| City<br>Pittsburgh   | State<br>PA  |   |
| Zip Code<br>15211  | Purpose of Disbursement<br>TV/Radio  | Category/<br>Type<br>004  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Brabender Cox LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 29 / 2014                            |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>38634.00<br><b>Transaction ID : SB17.7815</b> |
| City<br>Pittsburgh   | State<br>PA  |  |
| Zip Code<br>15211  | Purpose of Disbursement<br>Cable/Radio   | Category/<br>Type<br>004   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 80556.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |               |  |  |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 53 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Brabender Cox LLC</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 30 / 2014                                 |
| Mailing Address 1218 Grandview Avenue  |  | Amount of Each Disbursement this Period<br>13794.00<br><b>Transaction ID : SB17.8111</b> |
| City<br>Pittsburgh   | State<br>PA  |  |
| Zip Code<br>15211  | Purpose of Disbursement<br>Cable/TV  | Category/<br>Type<br>004   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Justin Bryant</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                |
| Mailing Address 120 Knolls Dr  |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.7834</b> |
| City<br>Stonybrook   | State<br>NY  |   |
| Zip Code<br>11790  | Purpose of Disbursement<br>Campaign Salary   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Justin Bryant</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 15 / 2014                                |
| Mailing Address 120 Knolls Dr  |  | Amount of Each Disbursement this Period<br>1500.00<br><b>Transaction ID : SB17.7592</b> |
| City<br>Stonybrook   | State<br>NY  |   |
| Zip Code<br>11790  | Purpose of Disbursement<br>Office Work/Campaign Team   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 16794.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 54 OF 94                      |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 04 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>663.07<br><b>Transaction ID : SB17.7790</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Cable/Internet/Phones   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 23 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>182.56<br><b>Transaction ID : SB17.7813</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Cable/Internet/Phones   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Cablevision</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 07 / 2014                               |
| Mailing Address 1111 Stewart Ave   |  | Amount of Each Disbursement this Period<br>269.55<br><b>Transaction ID : SB17.7590</b> |
| City<br>Bethpage   | State<br>NY  |  |
| Zip Code<br>11714  | Purpose of Disbursement<br>Cable/Internet/Phones   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1115.18 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 55 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Campaigns Unlimited</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>5925.00<br><b>Transaction ID : SB17.7830</b> |
| City<br>Shirley  | State<br>NY  |   |
| Zip Code<br>11967  | Purpose of Disbursement<br>Palm Cards/Printing   | Category/<br>Type<br>006  |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Campaigns Unlimited</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2014                                 |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>13100.00<br><b>Transaction ID : SB17.7869</b> |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>Lawn Signs  | Category/<br>Type<br>006   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Campaigns Unlimited</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 23 / 2014                               |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>332.03<br><b>Transaction ID : SB17.7721</b> |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>Postage   | Category/<br>Type<br>001   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 19357.03 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 56 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Castle Strategies LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address 11105 Harrowfield Road   |  | Amount of Each Disbursement this Period<br>4300.00<br><b>Transaction ID : SB17.7825</b> |
| City<br>Charlotte  | State<br>NC  |   |
| Zip Code<br>28226  | Purpose of Disbursement<br>Advertising Retainer  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Castle Strategies LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 08 / 2014                           |
| Mailing Address 11105 Harrowfield Road   |  | Amount of Each Disbursement this Period<br>4050.00<br><b>Transaction ID : SB17.7826</b> |
| City<br>Charlotte  | State<br>NC  |   |
| Zip Code<br>28226  | Purpose of Disbursement<br>Advertising Retainer  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CMDI</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                          |
| Mailing Address 1593 Spring Hill rd<br>Suite 400   |  | Amount of Each Disbursement this Period<br>229.18<br><b>Transaction ID : SB17.7822</b> |
| City<br>Tysons Corner  | State<br>VA  |  |
| Zip Code<br>22182  | Purpose of Disbursement<br>Credit Card Fees  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 8579.18 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE 57 OF 94   |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)   |  | Date of Disbursement                    |
| <b>A. CMDI</b>  |  | M M / D D / Y Y Y Y<br>04 / 29 / 2014   |
| Mailing Address 1593 Spring Hill rd<br>Suite 400  |  | Amount of Each Disbursement this Period |
| City Tysons Corner  | State VA   | Zip Code 22182                          |
| Purpose of Disbursement<br>Credit card monthly fees   | Category/Type<br>001   | 733.23                                  |
| Candidate Name<br><b>Zeldin For Congress</b>  | Disbursement For: 2014   | <b>Transaction ID : SB17.8652</b>       |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

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|---|--|---|
| Full Name (Last, First, Middle Initial)   |  | Date of Disbursement                    |
| <b>B. CMDI</b>  |  | M M / D D / Y Y Y Y<br>05 / 28 / 2014   |
| Mailing Address 1593 Spring Hill rd<br>Suite 400  |  | Amount of Each Disbursement this Period |
| City Tysons Corner  | State VA   | Zip Code 22182                          |
| Purpose of Disbursement<br>Credit card fees   | Category/Type<br>001   | 54.80                                   |
| Candidate Name<br><b>Zeldin For Congress</b>  | Disbursement For: 2014   | <b>Transaction ID : SB17.8654</b>       |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

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|---|--|---|
| Full Name (Last, First, Middle Initial)   |  | Date of Disbursement                    |
| <b>c. Consolidated Fuel Oil Company</b>   |  | M M / D D / Y Y Y Y<br>04 / 09 / 2014   |
| Mailing Address P.O. Box 2270   |  | Amount of Each Disbursement this Period |
| City St. James  | State NY   | Zip Code 11780                          |
| Purpose of Disbursement<br>Fuel   | Category/Type<br>001   | 856.87                                  |
| Candidate Name<br><b>Zeldin For Congress</b>  | Disbursement For: 2014   | <b>Transaction ID : SB17.7789</b>       |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1644.90 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 58 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Consolidated Fuel Oil Company</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 25 / 2014                          |
| Mailing Address P.O. Box 2270  |  | Amount of Each Disbursement this Period<br>791.47<br><b>Transaction ID : SB17.7732</b> |
| City<br>St. James  | State<br>NY  |  |
| Zip Code<br>11780  | Purpose of Disbursement<br>Oil   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kara Cumoletti</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                          |
| Mailing Address 4000 Stonegate Dr<br>Apt 4104  |  | Amount of Each Disbursement this Period<br>341.17<br><b>Transaction ID : SB17.7839</b> |
| City<br>Rensselaer   | State<br>NY  |  |
| Zip Code<br>12144  | Purpose of Disbursement<br>Reimbursements  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Straight Talk Wireless</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014   |
| Mailing Address 9700 NW 112th Avenue   |  | Amount of Each Disbursement this Period<br>32.91<br><b>Transaction ID : SB17.7839.0</b><br><b>[MEMO ITEM]</b> |
| City<br>Miami  | State<br>FL  |   |
| Zip Code<br>33178  | Purpose of Disbursement<br>Phone Refill  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1132.64 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 59 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Straight Talk Wireless</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014 |
| Mailing Address 9700 NW 112th Avenue  |   | Amount of Each Disbursement this Period<br>32.91              |
| City Miami  | State FL Zip Code 33178   |   |
| Purpose of Disbursement<br>Phone Refill                                     | Category/Type<br>001  | Transaction ID : SB17.7839.1<br><b>[MEMO ITEM]</b>            |
| Candidate Name<br><b>Zeldin For Congress</b>                                | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Airways</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 4000 East Sky Harbor Blvd                       |   | Amount of Each Disbursement this Period<br>250.00             |
| City Phoenix  | State AZ Zip Code 85034   |   |
| Purpose of Disbursement<br>Air Ticket to Washington             | Category/Type<br>002  | Transaction ID : SB17.7839.4<br><b>[MEMO ITEM]</b>            |
| Candidate Name<br><b>Zeldin For Congress</b>                    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Alexander Damianos</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 01 / 2014 |
| Mailing Address One Meadow Gate East                                    |  | Amount of Each Disbursement this Period<br>1164.80            |
| City Head of the Harbor   | State NY Zip Code 11780  |   |
| Purpose of Disbursement<br>In-kind - June Rent                          | Category/Type  | Transaction ID : SB17.8686                                    |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1164.80 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 60 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. John Damianos</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                           |
| Mailing Address 14 Blueberry Ridge Road  |   | Amount of Each Disbursement this Period<br>1376.33<br><b>Transaction ID : SB17.8679</b> |
| City<br>Setauket   | State<br>NY   |   |
| Zip Code<br>11733  | Purpose of Disbursement<br>In-kind - Rent   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Markella Damianos</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address One Meadow Gate East   |   | Amount of Each Disbursement this Period<br>1164.80<br><b>Transaction ID : SB17.8681</b> |
| City<br>Head of the Harbor   | State<br>NY   |   |
| Zip Code<br>11780  | Purpose of Disbursement<br>In-kind - April Rent   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Markella Damianos</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                           |
| Mailing Address One Meadow Gate East   |   | Amount of Each Disbursement this Period<br>1164.80<br><b>Transaction ID : SB17.8683</b> |
| City<br>Head of the Harbor   | State<br>NY   |   |
| Zip Code<br>11780  | Purpose of Disbursement<br>In-kind - May Rent   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3705.93 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 61 OF 94                      |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jennifer Disiena</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 22 / 2014                          |
| Mailing Address 22 Pine Dr  |  | Amount of Each Disbursement this Period<br>323.70<br><b>Transaction ID : SB17.7712</b> |
| City<br>Woodbury  | State<br>NY  |  |
| Purpose of Disbursement<br>Office Work  | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Eastern American Data</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                          |
| Mailing Address P.O Box 8043  |  | Amount of Each Disbursement this Period<br>323.70<br><b>Transaction ID : SB17.7793</b> |
| City<br>Long Island City  | State<br>NY  |  |
| Purpose of Disbursement<br>Copier Rental for Office   | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Eastern American Data</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2014                          |
| Mailing Address P.O Box 8043  |  | Amount of Each Disbursement this Period<br>323.70<br><b>Transaction ID : SB17.7792</b> |
| City<br>Long Island City  | State<br>NY  |  |
| Purpose of Disbursement<br>Copier Rental for Office   | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 783.90 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 62 OF 94                      |                                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Eastern American Data</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 25 / 2014                          |
| Mailing Address P.O Box 8043   |   | Amount of Each Disbursement this Period<br>184.66<br><b>Transaction ID : SB17.7734</b> |
| City State Zip Code<br>Long Island City NY 11101                           | Purpose of Disbursement<br>Toners for Copy Machine<br>001<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Eastern American Data</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 25 / 2014                          |
| Mailing Address P.O Box 8043   |   | Amount of Each Disbursement this Period<br>323.70<br><b>Transaction ID : SB17.7794</b> |
| City State Zip Code<br>Long Island City NY 11101                           | Purpose of Disbursement<br>Copier Rental for Office<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Empire Nat'l Bank</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 30 / 2014                         |
| Mailing Address 1044 William Floyd Parkway                             |   | Amount of Each Disbursement this Period<br>60.00<br><b>Transaction ID : SB17.8632</b> |
| City State Zip Code<br>Shirley NY 11967                                | Purpose of Disbursement<br>Bank Fee<br>001<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 568.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 63 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Empire Nat'l Bank</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 14 / 2014                         |
| Mailing Address 1044 William Floyd Parkway   |  | Amount of Each Disbursement this Period<br>30.00<br><b>Transaction ID : SB17.8639</b> |
| City<br>Shirley  | State<br>NY  |   |
| Zip Code<br>11967  | Purpose of Disbursement<br>Bank Fee  | Category/<br>Type<br>001  |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Global Payments</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 22 / 2014                         |
| Mailing Address 10705 Red Run Blvd   |  | Amount of Each Disbursement this Period<br>55.91<br><b>Transaction ID : SB17.8655</b> |
| City<br>Rockville  | State<br>MD  |   |
| Zip Code<br>20855  | Purpose of Disbursement<br>Credit Card Fees  | Category/<br>Type<br>001  |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Global Payments</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 31 / 2014                         |
| Mailing Address 10705 Red Run Blvd   |  | Amount of Each Disbursement this Period<br>49.34<br><b>Transaction ID : SB17.8661</b> |
| City<br>Rockville  | State<br>MD  |   |
| Zip Code<br>20855  | Purpose of Disbursement<br>Credit Card Fees  | Category/<br>Type<br>001  |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 135.25 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 64 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GMG Printing &amp; Marketing</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2014                                 |
| Mailing Address P.O. Box 677  |  | Amount of Each Disbursement this Period<br>20314.08<br><b>Transaction ID : SB17.7884</b> |
| City<br>Shirley   | State<br>NY  |  |
| Zip Code<br>11967   | Purpose of Disbursement<br>Postage for Mailing   | Category/<br>Type<br>004   |
| Candidate Name<br>Zeldin For Congress   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             |  |
| State: NY   | District: 01   |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GMG Printing &amp; Marketing</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 03 / 2014                                |
| Mailing Address P.O. Box 677  |  | Amount of Each Disbursement this Period<br>6842.00<br><b>Transaction ID : SB17.7885</b> |
| City<br>Shirley   | State<br>NY  |   |
| Zip Code<br>11967   | Purpose of Disbursement<br>Printing/Mailing  | Category/<br>Type<br>006  |
| Candidate Name<br>Zeldin For Congress   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             |   |
| State: NY   | District: 01   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. GMG Printing &amp; Marketing</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 25 / 2014                                |
| Mailing Address P.O. Box 677  |  | Amount of Each Disbursement this Period<br>3609.02<br><b>Transaction ID : SB17.7870</b> |
| City<br>Shirley   | State<br>NY  |   |
| Zip Code<br>11967   | Purpose of Disbursement<br>Postage/Mailing   | Category/<br>Type<br>004  |
| Candidate Name<br>Zeldin For Congress   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             |   |
| State: NY   | District: 01   |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 30765.10 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 65 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A. Belinda Groneman**

Full Name (Last, First, Middle Initial)

Mailing Address 124 Dock Rd.

City East Islip State NY Zip Code 11730

Purpose of Disbursement Reimbursement Expenses for Headquarters

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 3357.31

Transaction ID : SB17.7928

Category/Type: 001

**B. New York Husco**

Full Name (Last, First, Middle Initial)

Mailing Address 736 Main St

City Islip State NY Zip Code 11751

Purpose of Disbursement Gas

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 50.54

Transaction ID : SB17.7928.9

[MEMO ITEM]

Category/Type: 002

**c. Staples East Islip**

Full Name (Last, First, Middle Initial)

Mailing Address 2650-1 Sunrise Highway

City East Islip State NY Zip Code 11730

Purpose of Disbursement Office Folders

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 25.39

Transaction ID : SB17.7928.14

[MEMO ITEM]

Category/Type: 006

**SUBTOTAL** of Disbursements This Page (optional) ..... 3357.31

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

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 66 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples East Islip</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 2650-1 Sunrise Highway                                  |   | Amount of Each Disbursement this Period<br>97.95              |
| City East Islip   | State NY Zip Code 11730   |   |
| Purpose of Disbursement<br>Office Supplies                              | Category/Type<br>001  | Transaction ID : SB17.7928.16<br><b>[MEMO ITEM]</b>           |
| Candidate Name<br>Zeldin For Congress                                   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. New York Husco</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |   | Amount of Each Disbursement this Period<br>79.00              |
| City Islip  | State NY Zip Code 11751   |   |
| Purpose of Disbursement<br>Gas                                      | Category/Type<br>002  | Transaction ID : SB17.7928.18<br><b>[MEMO ITEM]</b>           |
| Candidate Name<br>Zeldin For Congress                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Costco</b>         |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 125 Beacon Dr                                       |   | Amount of Each Disbursement this Period<br>315.17             |
| City Holbrook   | State NY Zip Code 11741   |   |
| Purpose of Disbursement<br>Office Snacks and Drinks for all Offices | Category/Type<br>001  | Transaction ID : SB17.7928.19<br><b>[MEMO ITEM]</b>           |
| Candidate Name<br>Zeldin For Congress                               | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 67 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>71.35              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7928.20<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress   |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>72.00              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7928.21<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress   |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>45.41              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7928.22<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress   |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 68 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. New York Husco</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address 736 Main St  |  | Amount of Each Disbursement this Period<br>50.00         |
| City<br>Islip  | State<br>NY  |  |
| Zip Code<br>11751  |  |  |
| Purpose of Disbursement<br>Gas   |  | Category/<br>Type<br>002                                 |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. New York Husco</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address 736 Main St  |  | Amount of Each Disbursement this Period<br>50.07         |
| City<br>Islip  | State<br>NY  |  |
| Zip Code<br>11751  |  |  |
| Purpose of Disbursement<br>Gas   |  | Category/<br>Type<br>002                                 |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples Stony Brook</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address 2100 Nesconset Highway   |  | Amount of Each Disbursement this Period<br>1702.01       |
| City<br>Stony Brook  | State<br>NY  |  |
| Zip Code<br>11790  |  |  |
| Purpose of Disbursement<br>Office Supplies   |  | Category/<br>Type<br>001                                 |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 69 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. New York Husco</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address 736 Main St  |  | Amount of Each Disbursement this Period<br>71.00         |
| City<br>Islip  | State<br>NY  |  |
| Zip Code<br>11751  | Purpose of Disbursement<br>Gas   | Transaction ID : SB17.7928.30<br><b>[MEMO ITEM]</b>      |
| Candidate Name<br>Zeldin For Congress  | Category/Type<br>002   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Belinda Groneman</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2014 |
| Mailing Address 124 Dock Rd.   |  | Amount of Each Disbursement this Period<br>1388.47       |
| City<br>East Islip   | State<br>NY  |  |
| Zip Code<br>11730  | Purpose of Disbursement<br>Expense Reimbursements for Headquarters   | Transaction ID : SB17.7986                               |
| Candidate Name<br>Zeldin For Congress  | Category/Type<br>001   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples East Islip</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address 2650-1 Sunrise Highway   |  | Amount of Each Disbursement this Period<br>13.35         |
| City<br>East Islip   | State<br>NY  |  |
| Zip Code<br>11730  | Purpose of Disbursement<br>Office Supplies   | Transaction ID : SB17.7986.3<br><b>[MEMO ITEM]</b>       |
| Candidate Name<br>Zeldin For Congress  | Category/Type<br>001   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1388.47 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE 70 OF 94   |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>68.41              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7986.7<br><br>[MEMO ITEM]               |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>60.00              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7986.9<br><br>[MEMO ITEM]               |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. New York Husco</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 12 / 2014 |
| Mailing Address 736 Main St   |  | Amount of Each Disbursement this Period<br>73.00              |
| City<br>Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Gas  | Category/<br>Type<br>002   | Transaction ID : SB17.7986.10<br><br>[MEMO ITEM]              |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY   | District: 01   |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 71 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. New York Husco</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 05 / 2014 |
| Mailing Address 736 Main St  |   | Amount of Each Disbursement this Period<br>34.35              |
| City<br>Islip  | State<br>NY   |   |
| Purpose of Disbursement<br>Gas   | Category/<br>Type<br>002  | Transaction ID : SB17.7986.11<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Walmart</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 11 / 2014 |
| Mailing Address 161 Centereach Mall  |   | Amount of Each Disbursement this Period<br>84.67              |
| City<br>Centereach   | State<br>NY   |   |
| Purpose of Disbursement<br>Gas   | Category/<br>Type<br>002  | Transaction ID : SB17.7986.12<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples Inc</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 08 / 2014 |
| Mailing Address 526 Route 111  |   | Amount of Each Disbursement this Period<br>89.29              |
| City<br>Hauppauge  | State<br>NY   |   |
| Purpose of Disbursement<br>Ink Cartridges  | Category/<br>Type<br>006  | Transaction ID : SB17.7986.13<br><br>[MEMO ITEM]              |
| Candidate Name<br>Zeldin For Congress  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 72 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples Stony Brook</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 08 / 2014 |
| Mailing Address 2100 Nesconset Highway   |  | Amount of Each Disbursement this Period<br>597.43             |
| City<br>Stony Brook  | State<br>NY  |   |
| Purpose of Disbursement<br>Computer  | Category/<br>Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  | Transaction ID : SB17.7986.15<br><br>[MEMO ITEM]              |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Belinda Groneman</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 23 / 2014 |
| Mailing Address 124 Dock Rd.   |  | Amount of Each Disbursement this Period<br>743.62             |
| City<br>East Islip   | State<br>NY  |   |
| Purpose of Disbursement<br>Expense Reimbursement for Airline Ticket  | Category/<br>Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  | Transaction ID : SB17.8009                                    |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Verizon</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 15 / 2014 |
| Mailing Address P.O Box 15124  |  | Amount of Each Disbursement this Period<br>112.62             |
| City<br>Albany   | State<br>NY  |   |
| Purpose of Disbursement<br>Phone Bill  | Category/<br>Type<br>001   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  | Transaction ID : SB17.8009.0<br><br>[MEMO ITEM]               |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 743.62 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |



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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 73 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jet Blue</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014 |
| Mailing Address JFK Expressway   |  | Amount of Each Disbursement this Period<br>631.00        |
| City<br>New York   | State<br>NY  |  |
| Zip Code<br>11430  | Purpose of Disbursement<br>Jet Blue Plane Ticket   | Transaction ID : SB17.8009.1                             |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/Type<br>002   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]  |
| State: NY District: 01   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Harleysville Insurance</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 02 / 2014 |
| Mailing Address PO Box 37712   |  | Amount of Each Disbursement this Period<br>21.12         |
| City<br>Philadelphia   | State<br>PA  |  |
| Zip Code<br>19101  | Purpose of Disbursement<br>Insurance   | Transaction ID : SB17.7755                               |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/Type<br>001   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Home Depot</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 09 / 2014 |
| Mailing Address William Floyd Parkway  |  | Amount of Each Disbursement this Period<br>794.67        |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>4x4 Poles For Signs   | Transaction ID : SB17.8635                               |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/Type<br>004   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 815.79 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 74 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. HSP Direct</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2014                           |
| Mailing Address 13755 Sunrise Valley Dr<br>Suite 450            |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.8659</b> |
| City Herndon State VA Zip Code 20171                            | Purpose of Disbursement Direct Mail Fundraising<br>006<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Keegan Enterprise</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014                           |
| Mailing Address 24 Bellemeade Avenue                                   |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.7836</b> |
| City Smithtown State NY Zip Code 11787                                 | Purpose of Disbursement Rent<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Keegan Enterprise</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014                           |
| Mailing Address 24 Bellemeade Avenue                                   |   | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.7814</b> |
| City Smithtown State NY Zip Code 11787                                 | Purpose of Disbursement Rent<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 75 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Keegan Enterprise</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 30 / 2014  |
| Mailing Address 24 Bellemeade Avenue                                   |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.8109</b>  |
| City<br>Smithtown  | State<br>NY  |  |
| Purpose of Disbursement<br>Rent  | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Keegan Enterprise</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 30 / 2014  |
| Mailing Address 24 Bellemeade Avenue                                   |  | Amount of Each Disbursement this Period<br>350.00<br><b>Transaction ID : SB17.8110</b>   |
| City<br>Smithtown  | State<br>NY  |  |
| Purpose of Disbursement<br>Rent  | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Lighthouse Consulting</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014  |
| Mailing Address 151 Brompton Road  |  | Amount of Each Disbursement this Period<br>7500.00<br><b>Transaction ID : SB17.7827</b>  |
| City<br>Garden City  | State<br>NY  |  |
| Purpose of Disbursement<br>Retainer For Campaign Manager                   | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                               | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY  | District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 8850.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 76 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Lighthouse Consulting</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                |
| Mailing Address 151 Brompton Road  |  | Amount of Each Disbursement this Period<br>7500.00<br><b>Transaction ID : SB17.7828</b> |
| City Garden City State NY Zip Code 11530                                   | Purpose of Disbursement Retainer for Campaign Manager<br>Candidate Name Zeldin For Congress<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Category/Type<br>001   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Lighthouse Consulting</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                |
| Mailing Address 151 Brompton Road  |  | Amount of Each Disbursement this Period<br>2500.00<br><b>Transaction ID : SB17.7829</b> |
| City Garden City State NY Zip Code 11530                                   | Purpose of Disbursement Retainer for Campaign Manager<br>Candidate Name Zeldin For Congress<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Category/Type<br>001   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Lighthouse Consulting</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 09 / 2014                                |
| Mailing Address 151 Brompton Road  |  | Amount of Each Disbursement this Period<br>7500.00<br><b>Transaction ID : SB17.7588</b> |
| City Garden City State NY Zip Code 11530                                   | Purpose of Disbursement Retainer for Campaign Manager<br>Candidate Name Zeldin For Congress<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Category/Type<br>001   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 17500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 77 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. L I Screen Printing</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 05 / 2014                          |
| Mailing Address 45 Ramsey Rd<br>Unit 20   |  | Amount of Each Disbursement this Period<br>641.97<br><b>Transaction ID : SB17.7723</b> |
| City Shirley  | State NY Zip Code 11967  |  |
| Purpose of Disbursement<br>Supplies   |  | Category/<br>Type  |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Majority Strategies</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address 135 Professional drive<br>Suite 104   |  | Amount of Each Disbursement this Period<br>1250.00<br><b>Transaction ID : SB17.7819</b> |
| City Ponte Vedra Beach  | State FL Zip Code 32082  |   |
| Purpose of Disbursement<br>Mailing/Design   |  | Category/<br>Type   |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Nancy Marks</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 02 / 2014                          |
| Mailing Address 47 Flintlock Drive  |  | Amount of Each Disbursement this Period<br>608.00<br><b>Transaction ID : SB17.7872</b> |
| City Shirley  | State NY Zip Code 11967  |  |
| Purpose of Disbursement<br>Reimburse Plane Ticket to Las Vegas  |  | Category/<br>Type  |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |  |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2499.97 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 78 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Jet Blue</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 02 / 2014 |
| Mailing Address JFK Expressway   |  | Amount of Each Disbursement this Period<br>608.00        |
| City<br>New York   | State<br>NY  |  |
| Zip Code<br>11430  | Purpose of Disbursement<br>Plane Ticket to Las Vegas   | Transaction ID : SB17.7872.0<br><b>[MEMO ITEM]</b>       |
| Candidate Name<br>Zeldin For Congress  | Category/<br>Type<br>002   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Nancy Marks</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 25 / 2014 |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>278.56        |
| City<br>Shirley  | State<br>NY  |  |
| Zip Code<br>11967  | Purpose of Disbursement<br>Reimbursement for Paper   | Transaction ID : SB17.7879<br><b>[MEMO ITEM]</b>         |
| Candidate Name<br>Zeldin For Congress  | Category/<br>Type<br>001   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Paper Division Inc</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 25 / 2014 |
| Mailing Address 1595C Smithtown Ave  |  | Amount of Each Disbursement this Period<br>278.56        |
| City<br>Bohemia  | State<br>NY  |  |
| Zip Code<br>11716  | Purpose of Disbursement<br>Office Paper  | Transaction ID : SB17.7879.0<br><b>[MEMO ITEM]</b>       |
| Candidate Name<br>Zeldin For Congress  | Category/<br>Type<br>001   |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 278.56 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 79 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Nancy Marks</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 30 / 2014                              |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>94.99<br><b>Transaction ID : SB17.7886</b> |
| City<br>Shirley  | State<br>NY  |   |
| Purpose of Disbursement<br>Reimbursement Expenses for Campaign Materials   |  | Category/<br>Type<br>002  |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY  | District: 01   |   |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Nancy Marks</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 02 / 2014                               |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>813.60<br><b>Transaction ID : SB17.7875</b> |
| City<br>Shirley  | State<br>NY  |  |
| Purpose of Disbursement<br>Reimbursement for Toner   |  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. 4 Ink Jets</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 02 / 2014   |
| Mailing Address 3700 Cover Street  |  | Amount of Each Disbursement this Period<br>813.60<br><b>Transaction ID : SB17.7875.0</b><br><b>[MEMO ITEM]</b> |
| City<br>Long Beach   | State<br>CA  |  |
| Purpose of Disbursement<br>Toner   |  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   |  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|   |        |
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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 908.59 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 80 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Nancy Marks</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 23 / 2014                                |
| Mailing Address 47 Flintlock Drive   |  | Amount of Each Disbursement this Period<br>1160.00<br><b>Transaction ID : SB17.7722</b> |
| City<br>Shirley  | State<br>NY  |   |
| Zip Code<br>11967  | Purpose of Disbursement<br>Event   | Category/<br>Type<br>007  |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. McLaughlin &amp; Associates Inc</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 01 / 2014                                 |
| Mailing Address 566 South Route 303  |  | Amount of Each Disbursement this Period<br>17093.00<br><b>Transaction ID : SB17.7759</b> |
| City<br>Blauvelt   | State<br>NY  |  |
| Zip Code<br>10913  | Purpose of Disbursement<br>Interviews  | Category/<br>Type<br>004   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Merchant E-Solutions</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 08 / 2014                               |
| Mailing Address PO Box 13305   |  | Amount of Each Disbursement this Period<br>154.20<br><b>Transaction ID : SB17.8672</b> |
| City<br>Spokane  | State<br>WA  |  |
| Zip Code<br>99213  | Purpose of Disbursement<br>Credit Card Fees  | Category/<br>Type<br>001   |
| Candidate Name<br>Zeldin For Congress  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18407.20 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



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

|   |   |               |  |  |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 81 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Merchant E-Solutions</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 05 / 2014                               |
| Mailing Address PO Box 13305  |  | Amount of Each Disbursement this Period<br>348.26<br><b>Transaction ID : SB17.8676</b> |
| City<br>Spokane   | State<br>WA  |  |
| Zip Code<br>99213   | Purpose of Disbursement<br>Credit Card Fees  | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>                              | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014  | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General   |  |
| State: NY   | District: 01   |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Kevin Morello</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 14 / 2014                              |
| Mailing Address 306 Aster Road                                     |  | Amount of Each Disbursement this Period<br>62.00<br><b>Transaction ID : SB17.7862</b> |
| City<br>West Islip   | State<br>NY  |   |
| Zip Code<br>11795  | Purpose of Disbursement<br>Expense Reimbursement   | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General   |   |
| State: NY  | District: 01   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kevin Morello</b> |  | Date of Disbursement<br>MM / DD / YYYY<br>04 / 16 / 2014                                |
| Mailing Address 306 Aster Road                                     |  | Amount of Each Disbursement this Period<br>1800.00<br><b>Transaction ID : SB17.7832</b> |
| City<br>West Islip   | State<br>NY  |   |
| Zip Code<br>11795  | Purpose of Disbursement<br>Campaign Salary/Data Entry  | Category/<br>Type<br>001  |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General   |   |
| State: NY  | District: 01   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2210.26 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 82 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Oorbeek Morehouse Strategies, LLC</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014                           |
| Mailing Address 5614 Garnetts Farm Drive   |   | Amount of Each Disbursement this Period<br>2000.00<br><b>Transaction ID : SB17.7820</b> |
| City Haymarket State VA Zip Code 20169   | Purpose of Disbursement Consulting<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Paper Division Inc</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 02 / 2014                          |
| Mailing Address 1595C Smithtown Ave  |   | Amount of Each Disbursement this Period<br>369.87<br><b>Transaction ID : SB17.7725</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Office Paper<br>001<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. PDQ Print and Mail Services</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br>8452.89<br><b>Transaction ID : SB17.8112</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Invites/Postage/Mailing<br>006<br>Category/Type   |   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NY District: 01 |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 10822.76 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 83 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 25 / 2014</b>                     |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>15386.03</b><br>Transaction ID : SB17.7800 |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Print/Mail<br>Category/Type <b>006</b>  |  |
| Candidate Name <b>Zeldin For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>                   |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>297.00</b><br>Transaction ID : SB17.7801 |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Printing<br>Category/Type <b>006</b>  |  |
| Candidate Name <b>Zeldin For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>                     |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>11043.55</b><br>Transaction ID : SB17.7802 |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Print/Mail<br>Category/Type <b>006</b>  |  |
| Candidate Name <b>Zeldin For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>26726.58</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                 |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 84 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>                            |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>15386.03</b><br><b>Transaction ID : SB17.7803</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Mailing<br>Category/Type <b>006</b>   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 28 / 2014</b>                          |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>565.00</b><br><b>Transaction ID : SB17.7804</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Print<br>Category/Type <b>006</b>   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>05 / 27 / 2014</b>                          |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br><b>620.00</b><br><b>Transaction ID : SB17.7895</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Print 4x4<br>Category/Type <b>004</b>   |   |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>16571.03</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                 |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 85 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. PDQ Print and Mail Services</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 27 / 2014                            |
| Mailing Address P.O Box 245  |   | Amount of Each Disbursement this Period<br>13592.38<br><b>Transaction ID : SB17.7896</b> |
| City Bohemia State NY Zip Code 11716   | Purpose of Disbursement Mailing/Printing<br>006<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>                                     | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01   |   |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Piryx Inc</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 04 / 2014                         |
| Mailing Address 144 2nd Street 1st Floor                       |   | Amount of Each Disbursement this Period<br>29.00<br><b>Transaction ID : SB17.8647</b> |
| City San Francisco State CA Zip Code 94105                     | Purpose of Disbursement Credit Card Fees<br>001<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                   | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Political Network</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                           |
| Mailing Address PO Box 21383   |   | Amount of Each Disbursement this Period<br>4880.57<br><b>Transaction ID : SB17.7805</b> |
| City Columbus State OH Zip Code 43221                                  | Purpose of Disbursement Tele Town Hall<br>006<br>Category/Type  |   |
| Candidate Name<br><b>Zeldin For Congress</b>                           | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18501.95 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 86 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Political Network</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 09 / 2014                           |
| Mailing Address PO Box 21383   |  | Amount of Each Disbursement this Period<br>2652.00<br><b>Transaction ID : SB17.7807</b> |
| City<br>Columbus   | State<br>OH  |   |
| Zip Code<br>43221  | Purpose of Disbursement<br>Tele Town Hall  | Category/<br>Type<br>006  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Political Network</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 02 / 2014                           |
| Mailing Address PO Box 21383   |  | Amount of Each Disbursement this Period<br>1069.46<br><b>Transaction ID : SB17.7806</b> |
| City<br>Columbus   | State<br>OH  |   |
| Zip Code<br>43221  | Purpose of Disbursement<br>Tele Town Hall  | Category/<br>Type<br>006  |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |   |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Riverhead Republican Committee</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 03 / 2014                          |
| Mailing Address PO Box 1428  |  | Amount of Each Disbursement this Period<br>359.00<br><b>Transaction ID : SB17.7808</b> |
| City<br>Riverhead  | State<br>NY  |  |
| Zip Code<br>11901  | Purpose of Disbursement<br>Lease   | Category/<br>Type<br>001   |
| Candidate Name<br><b>Zeldin For Congress</b>   | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: NY District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4071.46 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 87 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Riverhead Republican Committee</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 01 / 2014  |
| Mailing Address PO Box 1428   |  | Amount of Each Disbursement this Period<br>350.00<br><b>Transaction ID : SB17.7816</b>   |
| City<br>Riverhead   | State<br>NY  |  |
| Purpose of Disbursement<br>Lease  | Category/<br>Type<br>001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>  | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: NY   | District: 01   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Frederick Schlomann</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014  |
| Mailing Address 237 Old Willets Path                                     |   | Amount of Each Disbursement this Period<br>923.04<br><b>Transaction ID : SB17.8689</b>   |
| City<br>Smithtown  | State<br>NY   |  |
| Purpose of Disbursement<br>In-kind - Mailing Expenses Paid               | Category/<br>Type   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State:   | District:   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Susan Schlomann</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014  |
| Mailing Address 237 Old Willets Path                                 |   | Amount of Each Disbursement this Period<br>923.05<br><b>Transaction ID : SB17.8691</b>   |
| City<br>Smithtown  | State<br>NY   |  |
| Purpose of Disbursement<br>In-kind - Mailing Expenses Paid           | Category/<br>Type   |  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State:   | District:   |  |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2196.09 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 88 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Southwest Airlines</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 21 / 2014                          |
| Mailing Address 2702 Love Field Dr                                      |   | Amount of Each Disbursement this Period<br>546.50<br><b>Transaction ID : SB17.8626</b> |
| City Dallas State TX Zip Code 75235                                     | Purpose of Disbursement Southwest Airline Ticket to DC<br>002<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>                            | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |   |  |

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|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Square Inc</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 16 / 2014                          |
| Mailing Address 1455 Market Street Ste 600                      |   | Amount of Each Disbursement this Period<br>144.60<br><b>Transaction ID : SB17.8621</b> |
| City San Francisco State CA Zip Code 94103                      | Purpose of Disbursement Square Credit Card Fees<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 15 / 2014                          |
| Mailing Address 999 Montauk Highway                          |   | Amount of Each Disbursement this Period<br>327.57<br><b>Transaction ID : SB17.8620</b> |
| City Shirley State NY Zip Code 11967                         | Purpose of Disbursement Office Supplies<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1018.67 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 89 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples Stony Brook</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 09 / 2014</b> |
| Mailing Address 2100 Nesconset Highway   |  | Amount of Each Disbursement this Period<br><b>708.44</b>             |
| City<br>Stony Brook  | State<br>NY  |  |
| Zip Code<br>11790  | Purpose of Disbursement<br>Office Supplies for Headquarters  | <b>Transaction ID : SB17.8617</b>                                    |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/<br>Type<br><b>001</b>  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Staples Stony Brook</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>04 / 14 / 2014</b> |
| Mailing Address 2100 Nesconset Highway   |  | Amount of Each Disbursement this Period<br><b>268.17</b>             |
| City<br>Stony Brook  | State<br>NY  |  |
| Zip Code<br>11790  | Purpose of Disbursement<br>Office Supplies for Headquarters  | <b>Transaction ID : SB17.8619</b>                                    |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/<br>Type<br><b>001</b>  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Staples Stony Brook</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>05 / 09 / 2014</b> |
| Mailing Address 2100 Nesconset Highway   |  | Amount of Each Disbursement this Period<br><b>101.31</b>             |
| City<br>Stony Brook  | State<br>NY  |  |
| Zip Code<br>11790  | Purpose of Disbursement<br>Office Supplies   | <b>Transaction ID : SB17.8638</b>                                    |
| Candidate Name<br><b>Zeldin For Congress</b>   | Category/<br>Type<br><b>001</b>  |  |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY  | District: 01   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1077.92</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 90 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Suffolk Board of Elections</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 09 / 2014 |
| Mailing Address Yaphank Ave   |   | Amount of Each Disbursement this Period<br>75.00              |
| City Yaphank  | State NY Zip Code 11980   |   |
| Purpose of Disbursement<br>Voter Info   | Category/Type<br>001  | <b>Transaction ID : SB17.7835</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>                                    | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |   |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US Postmaster</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 15 / 2014 |
| Mailing Address 800 Montauk Highway                                |   | Amount of Each Disbursement this Period<br>1617.00            |
| City Shirley   | State NY Zip Code 11967   |   |
| Purpose of Disbursement<br>Stamps                                  | Category/Type<br>006  | <b>Transaction ID : SB17.7714</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. US Postmaster</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 28 / 2014 |
| Mailing Address 800 Montauk Highway                                |   | Amount of Each Disbursement this Period<br>490.00             |
| City Shirley   | State NY Zip Code 11967   |   |
| Purpose of Disbursement<br>Stamps                                  | Category/Type<br>006  | <b>Transaction ID : SB17.7894</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>                       | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: NY District: 01   |   |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2182.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 91 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>508.82<br><b>Transaction ID : SB17.7740</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Cell Phones<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 01 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>638.87<br><b>Transaction ID : SB17.7809</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Cell Phones<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 04 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>388.52<br><b>Transaction ID : SB17.7741</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Cell Phones<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1536.21 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 92 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 04 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>512.32<br><b>Transaction ID : SB17.8668</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Phone Bill<br>001<br>Category/Type  |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 23 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>797.77<br><b>Transaction ID : SB17.7818</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Cell Phones<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Verizon</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 07 / 2014                          |
| Mailing Address P.O Box 15124                                |   | Amount of Each Disbursement this Period<br>384.08<br><b>Transaction ID : SB17.7589</b> |
| City Albany State NY Zip Code 12212                          | Purpose of Disbursement Cell Phones<br>001<br>Category/Type   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                 | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: NY District: 01                                       |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1694.17 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 93 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Verizon</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 09 / 2014 |
| Mailing Address P.O Box 15124   |  | Amount of Each Disbursement this Period<br>71.66              |
| City Albany   | State NY Zip Code 12212  |   |
| Purpose of Disbursement<br>Cell Phones  | Category/Type<br>001   | <b>Transaction ID : SB17.7586</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Versus, LLC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 23 / 2014 |
| Mailing Address 101 Park Ave<br>Suite 2506  |  | Amount of Each Disbursement this Period<br>5000.00            |
| City New York   | State NY Zip Code 10178  |   |
| Purpose of Disbursement<br>Retainer   | Category/Type<br>001   | <b>Transaction ID : SB17.7811</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Washington Intelligence Bureau</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 10 / 2014 |
| Mailing Address 4128 Pepsi Place  |  | Amount of Each Disbursement this Period<br>200.00             |
| City Chantilly  | State VA Zip Code 20151  |   |
| Purpose of Disbursement<br>Postage & Delivery   | Category/Type<br>006   | <b>Transaction ID : SB17.8657</b>                             |
| Candidate Name<br><b>Zeldin For Congress</b>  |  |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: NY District: 01  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5271.66 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 94 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Washington Intelligence Bureau</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>04 / 18 / 2014                          |
| Mailing Address 4128 Pepsi Place  |   | Amount of Each Disbursement this Period<br>250.00<br><b>Transaction ID : SB17.8658</b> |
| City Chantilly State VA Zip Code 20151  | Purpose of Disbursement Postage & Delivery<br>Category/Type 006   |  |
| Candidate Name<br><b>Zeldin For Congress</b>  | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Widget Maker</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>05 / 05 / 2014                          |
| Mailing Address 1593 Springhill Road                              |   | Amount of Each Disbursement this Period<br>557.55<br><b>Transaction ID : SB17.8677</b> |
| City Tysons Corner State VA Zip Code 22182                        | Purpose of Disbursement Credit Card Fees<br>Category/Type 001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                      | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Widget Maker</b> |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>06 / 03 / 2014                          |
| Mailing Address 1593 Springhill Road                              |   | Amount of Each Disbursement this Period<br>173.60<br><b>Transaction ID : SB17.8645</b> |
| City Tysons Corner State VA Zip Code 22182                        | Purpose of Disbursement Credit Card Fees<br>Category/Type 001   |  |
| Candidate Name<br><b>Zeldin For Congress</b>                      | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: NY District: 01  |   |  |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 981.15    |
| <b>TOTAL</b> This Period (last page this line number only)..... | 390430.92 |