

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Friends of George Demos

ADDRESS (number and street) PO BOX 378 Ronkonkoma NY 11779 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00549816 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT 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 06 / 24 / 2014 in the State of NY (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 06 / 04 / 2014

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

Type or Print Name of Treasurer Robert Cole

Signature of Treasurer Robert Cole [Electronically Filed] Date 06 / 12 / 2014

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

Office Use Only table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of George Demos

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	59470.00	293625.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	59470.00	293625.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	945027.53	1909835.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	945027.53	1909835.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	383789.45	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2000000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of George Demos

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	58080.00	287405.00
(ii) Unitemized.....	1390.00	6220.00
(iii) TOTAL of contributions from individuals ▶	59470.00	293625.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	59470.00	293625.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	200000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	59470.00	2293625.00

DETAILED SUMMARY PAGE
of Disbursements

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

III. CASH SUMMARY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 86
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Matheos Alexandrou

Mailing Address 8 Oakwood Rd.

City Rocky Point State NY Zip Code 11778

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 26 / 2014

Transaction ID : SA11AI.5329

Amount of Each Receipt this Period
 P2014 250.00

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

Mailing Address 848 Alder Pl.

City Lodi State CA Zip Code 95242

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
 P2014 1000.00

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

Mailing Address 8551 E. Kettleman Ln.

City Lodi State CA Zip Code 95240

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5317

Amount of Each Receipt this Period
 P2014 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 6 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Eleni Andreopoulou

Mailing Address 17 E. 93rd

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
Moutfiore & Eisstein Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.5100

Amount of Each Receipt this Period
1000.00
P2014

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

Mailing Address 1317 Beach Ave.

City State Zip Code
Cape May NJ 08204

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

Name of Employer Occupation
La Mer Beachfront Inn Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period
200.00
P2014

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

Mailing Address 200 Old Palisade Rd, #1F

City State Zip Code
Fort Lee NJ 07024

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

Name of Employer Occupation
American Board of Prosthodontics Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5344

Amount of Each Receipt this Period
500.00
P2014

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Amanda Bagatta

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

City State Zip Code
New York NY 10022

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

Name of Employer Bagata Associates Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address 426 River Rd

City State Zip Code
North Tewksbury MA 01876

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

Name of Employer Gainesborough LLC Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2014

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
1000.00
P2014

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

Mailing Address 40 W. 4th St.

City State Zip Code
Patchogue NY 11772

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

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

Transaction ID : SA11AI.5180

Amount of Each Receipt this Period
50.00
P2014

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Ted Bestolarides

Mailing Address 6416 Monitor Pl.

City Stockton State CA Zip Code 95219

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

Name of Employer Bestolarides, CPA Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5302

Amount of Each Receipt this Period
 P2014
 500.00

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

Mailing Address 1836 Port Barmouth Pl.

City Newport Beach State CA Zip Code 92660

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

Name of Employer First American Mortgage Services Occupation Chief Information Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period
 P2014
 1500.00

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

Mailing Address PO Box 1029

City Remsenburg State NY Zip Code 11960

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5213

Amount of Each Receipt this Period
 P2014
 35.00

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

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

2035.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Sofia Bookis

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
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 / 20 / 2014

Transaction ID : SA11AI.5139

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address PO Box 2548

City State Zip Code
Lake Ronkonkoma NY 11779

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11AI.5189

Amount of Each Receipt this Period
50.00
P2014

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

Mailing Address 1403 High Bluff Dr.

City State Zip Code
Newport Beach CA 92660

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

Name of Employer Occupation
Alliant International University Director of Campus and Student Service

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 / 14 / 2014

Transaction ID : SA11AI.5296

Amount of Each Receipt this Period
1000.00
P2014

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Tykye Camaras

Mailing Address 932 Sandcastle Dr.

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer CAM Steel Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.5294

Amount of Each Receipt this Period
 P2014
 1000.00

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

Mailing Address 4 Flint Ct.

City E. Setauket State NY Zip Code 11733

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5259

Amount of Each Receipt this Period
 P2014
 15.00

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

Mailing Address PO Box 960

City Cutchogue State NY Zip Code 11935

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5211

Amount of Each Receipt this Period
 P2014
 35.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Patricia Chacopulos

Mailing Address 1 Rue Vallars

City Newport Beach State CA Zip Code 92660

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

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

Transaction ID : SA11AI.5276

Amount of Each Receipt this Period
2600.00
 P2014

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

Mailing Address 1 Rue Vallars

City Newport Beach State CA Zip Code 92660

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

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

Transaction ID : SA11AI.5277

Amount of Each Receipt this Period
1600.00
 G2014

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

Mailing Address 1900 Sound R.

City Greenport State NY Zip Code 11944

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

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

Transaction ID : SA11AI.5129

Amount of Each Receipt this Period
1500.00
 P2014

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

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

5700.00

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

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

FOR LINE NUMBER: PAGE 12 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

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

Mailing Address 1900 Sound R.

City Greenport State NY Zip Code 11944

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

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

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period
 _____ 1000.00

P2014

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

Mailing Address 918 N. Sea Rd.

City Southampton State NY Zip Code 11968

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 35.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.5219

Amount of Each Receipt this Period
 _____ 35.00

P2014

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

Mailing Address 1055 W. Joppa Rd.

City Baltimore State MD Zip Code 21204

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
 _____ 100.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.5105

Amount of Each Receipt this Period
 _____ 100.00

P2014

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

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

_____ 1135.00

**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 13 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Victor Clausen

Mailing Address 24 Maple Rd.

City Wading River State NY Zip Code 11792

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **75.00**

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

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period
50.00

P2014

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

Mailing Address 36 Lyncliff Rd.

City Hampton Bays State NY Zip Code 11946

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **15.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : SA11AI.5255

Amount of Each Receipt this Period
15.00

P2014

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

Mailing Address 1845 Port Charles Pl

City Newport Beach State CA Zip Code 92660

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

Name of Employer Occupation
 Homemaker Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : SA11AI.5102

Amount of Each Receipt this Period
1000.00

P2014

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

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

1065.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Eugene Crocilla

Mailing Address 17 Bowers Ct.

City State Zip Code
Smithtown NY 11787

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2014

Transaction ID : SA11AI.5245

Amount of Each Receipt this Period
25.00

P2014

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

Mailing Address 860 5th Ave.

City State Zip Code
New York NY 10065

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5135

Amount of Each Receipt this Period
500.00

P2014

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

Mailing Address 10 E. Point Ln.

City State Zip Code
Hampton Bays NY 11946

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
15.00

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

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period
15.00

P2014

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

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

540.00

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

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

FOR LINE NUMBER: PAGE 15 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Gerard Decima

Mailing Address 24 Joan Ct.

City Holtsville State NY Zip Code 11742

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period
 P2014 25.00

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

Mailing Address 9 Widgeon Rd.

City Center Moriches State NY Zip Code 11934

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

Name of Employer Occupation
 Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11AI.5107

Amount of Each Receipt this Period
 P2014 100.00

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

Mailing Address 12 Pheasant Hill Ln

City Old Brookville State NY Zip Code 11545

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

Name of Employer Occupation
 National Herald Publisher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period
 P2014 500.00

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

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

625.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
August Direnzo

Mailing Address 10 E. 70th

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Cushman & Walker Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : SA11AI.5079

Amount of Each Receipt this Period
200.00
P2014

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

Mailing Address 2 Sutton Place South

City State Zip Code
New York NY 10022

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
175.00

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

Transaction ID : SA11AI.5158

Amount of Each Receipt this Period
175.00
P2014

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

Mailing Address 5441 Palisade Ave.

City State Zip Code
Bronx NY 10471

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

Name of Employer Occupation
Drakotos Reality Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11AI.5148

Amount of Each Receipt this Period
1000.00
P2014

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

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

1375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) Demetrios Dralios		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 16 Sycamore Dr.		Transaction ID : SA11AI.5184
City Roslyn	State NY	
Zip Code 11576		Amount of Each Receipt this Period P2014 50.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 50.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

Full Name (Last, First, Middle Initial) Gregory Econn		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 9744 Wilshire Blvd		Transaction ID : SA11AI.5288
City Beverly Hills	State CA	
Zip Code 90212		Amount of Each Receipt this Period P2014 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 1000.00
Name of Employer Venbrooke Insurance	Occupation Managing Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Mercos Erotokritou		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 131 Horseblock Rd.		Transaction ID : SA11AI.5193
City Centereach	State NY	
Zip Code 11720		Amount of Each Receipt this Period P2014 35.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 35.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00	

SUBTOTAL of Receipts This Page (optional).....	1085.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 86
	<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)
Friends of George Demos

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

Mailing Address 5348 Saint Andrews Dr.

City Stockton State CA Zip Code 95219

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

Name of Employer AKF Development Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5298

Amount of Each Receipt this Period
 P2014 1000.00

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

Mailing Address 81 Rocky Point Yaphank Rd.

City Rocky Point State NY Zip Code 11778

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2014

Transaction ID : SA11AI.5195

Amount of Each Receipt this Period
 P2014 35.00

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

Mailing Address 77 Moriches Ave.

City Mastic State NY Zip Code 11950

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

Name of Employer Bauer Office Solutions Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
 P2014 200.00

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

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

1235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Estelle Fusco

Mailing Address 72 Moriches Rd.

City Lake Grove State NY Zip Code 11755

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5201

Amount of Each Receipt this Period
 P2014 35.00

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

Mailing Address 3356 Wisconsin Avenue

City South Gate State CA Zip Code 90280

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

Name of Employer Occupation
 Galanakis, Esq. Attorney/developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5152

Amount of Each Receipt this Period
 P2014 500.00

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

Mailing Address 2264 Fair Oaks Blvd.

City Sacramento State CA Zip Code 95825

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

Name of Employer Occupation
 Gianulias Property Management Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5147

Amount of Each Receipt this Period
 P2014 1000.00

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

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

1535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 86			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Julie Gianulias

Mailing Address 6315 Oakridge Way

City Sacramento State CA Zip Code 95831

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

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

Transaction ID : SA11AI.5103

Amount of Each Receipt this Period
1000.00

P2014

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

Mailing Address 91 Wood Rd.

City Centereach State NY Zip Code 11720

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **20.00**

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

Transaction ID : SA11AI.5117

Amount of Each Receipt this Period
20.00

P2014

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

Mailing Address 11 Eastbourne Bay

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer HMWC CPAs & Business Advisors Occupation CPA, Partner

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 / 29 / 2014

Transaction ID : SA11AI.5085

Amount of Each Receipt this Period
1000.00

P2014

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

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

2020.00

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

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

FOR LINE NUMBER: PAGE 21 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Peter Hoehmann

Mailing Address 14 Graces Way

City State Zip Code
Centereach NY 11720

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

Name of Employer Occupation
Island Transportation Corp Driver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

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

Transaction ID : SA11AI.5096

Amount of Each Receipt this Period
 P2014
 50.00

B. Full Name (Last, First, Middle Initial)
K.P. Huber

Mailing Address 16101 N. Ray Rd.

City State Zip Code
Lodi CA 95242

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

Name of Employer Occupation
Grupe Corporation 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 Y Y
 05 / 18 / 2014

Transaction ID : SA11AI.5323

Amount of Each Receipt this Period
 P2014
 250.00

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

Mailing Address 23 Widener Ln.

City State Zip Code
Southampton NY 11968

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2014

Transaction ID : SA11AI.5265

Amount of Each Receipt this Period
 P2014
 10.00

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

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

310.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) Linda Huskisson		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2014
Mailing Address 72 Pond Cir.		Transaction ID : SA11AI.5223
City Mount Sinai	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 35.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00	

Full Name (Last, First, Middle Initial) Mary Jaharis		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 499 Park Avenue		Transaction ID : SA11AI.5272
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 400.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

Full Name (Last, First, Middle Initial) Michael Jaharis		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 499 Park Avenue		Transaction ID : SA11AI.5271
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 2600.00
Name of Employer Self	Occupation Investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

SUBTOTAL of Receipts This Page (optional).....	3035.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Mary Johnson		Date of Receipt M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 155 E. 76 St.		Transaction ID : SA11AI.5321
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 250.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. George Kallins		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 16 Deerwood Ln.		Transaction ID : SA11AI.5284
City Newport Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 1500.00
Name of Employer ACP Management	Occupation President and CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) C. James Kallins		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 9756 Downey Sanford Brg Rd		Transaction ID : SA11AI.5278
City Downey	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 2000.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Lily Katos		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 365 Summit Drive		Transaction ID : SA11AI.5336
City Mattituck	State Zip Code NY 11952	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 200.00
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 200.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Kostas Kavayiotidis		Date of Receipt M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1000 Galloway Street		Transaction ID : SA11AI.5127
City Pacific Palisades	State Zip Code CA 90272	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 1000.00
Name of Employer Pacific Southwest Realty Services	Occupation Commercial Mortgage Banker	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Frank Knoll		Date of Receipt M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address PO Box 136		Transaction ID : SA11AI.5176
City Montauk	State Zip Code NY 11954	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 50.00
Name of Employer	Occupation	Election Cycle-to-Date 50.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
George Kofinas

Mailing Address 100 Winston Dr, PHH N

City State Zip Code
Cliffside Park NJ 07010

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

Name of Employer Occupation
Kofinas, MD Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.5342

Amount of Each Receipt this Period
1000.00

P2014

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

Mailing Address 452 Bay Ridge Parkway

City State Zip Code
Brooklyn NY 11209

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.5133

Amount of Each Receipt this Period
500.00

P2014

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

Mailing Address 12 E 86th st. #1021

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
GN Petroleum Networks Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5081

Amount of Each Receipt this Period
250.00

P2014

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Hercules Kontos		Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address 302A W. 12th St. #246		Transaction ID : SA11AI.5070
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 250.00
Name of Employer Accountants, Auditors, & consultants	Occupation CPA	Election Cycle-to-Date 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. George Kotsonis		Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address 126 E. 71st		Transaction ID : SA11AI.5098
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 500.00
Name of Employer Kotsonis Management LLC	Occupation Self	Election Cycle-to-Date 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Marie Kotsonis		Date of Receipt MM / DD / YYYY 05 / 14 / 2014
Mailing Address 20 E. 74th St.		Transaction ID : SA11AI.5308
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 500.00
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) Charles Lane		Date of Receipt MM / DD / YYYY 06 / 02 / 2014
Mailing Address 139 Ardito Ave.		Transaction ID : SA11AI.5227
City Kings Park	State NY	
Zip Code 11754		Amount of Each Receipt this Period P2014 35.00
FEC ID number of contributing federal political committee. C	Occupation	Election Cycle-to-Date 35.00
Name of Employer	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 35.00		

Full Name (Last, First, Middle Initial) William Lappas		Date of Receipt MM / DD / YYYY 05 / 09 / 2014
Mailing Address PO Box 1779		Transaction ID : SA11AI.5306
City Woodbridge	State CA	
Zip Code 95258		Amount of Each Receipt this Period P2014 500.00
FEC ID number of contributing federal political committee. C	Occupation Senior Managing Director	Election Cycle-to-Date 500.00
Name of Employer Woodbridge Capital Partners, LLC	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Maria Long		Date of Receipt MM / DD / YYYY 05 / 20 / 2014
Mailing Address 171 E. 84th St. 15c		Transaction ID : SA11AI.5089
City New York	State NY	
Zip Code 10028		Amount of Each Receipt this Period P2014 100.00
FEC ID number of contributing federal political committee. C	Occupation Homemaker	Election Cycle-to-Date 100.00
Name of Employer Homemaker	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 100.00		

SUBTOTAL of Receipts This Page (optional).....	635.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Leslie Ann Lynch

Mailing Address 214 Main St.

City State Zip Code
Center Moriches NY 11934

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5191

Amount of Each Receipt this Period
35.00
P2014

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

Mailing Address 970 Park Ave

City State Zip Code
New York NY 10028

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
250.00

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

Transaction ID : SA11AI.5087

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address 9 Halsey Ave.

City State Zip Code
Bayville NJ 08721

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

Name of Employer Occupation
Windessa Group Managing Member

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 / 02 / 2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
250.00
P2014

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

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

535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 86
	<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)
Friends of George Demos

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

Mailing Address 171 Mill Rd.

City: Holbrook State: NY Zip Code: 11741

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

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **65.00**

Date of Receipt: **05 / 27 / 2014**

Transaction ID : SA11AI.5232

Amount of Each Receipt this Period: **30.00**

P2014

B. Full Name (Last, First, Middle Initial)
T.A. Malinowski

Mailing Address 204 Bishops Rd.

City: Smithtown State: NY Zip Code: 11787

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

Name of Employer: Occupation:
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **10.00**

Date of Receipt: **05 / 29 / 2014**

Transaction ID : SA11AI.5119

Amount of Each Receipt this Period: **10.00**

P2014

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

Mailing Address 11 E 68th St

City: New York State: NY Zip Code: 10065

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

Name of Employer: Occupation:
Stribbling & Asc. Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **05 / 20 / 2014**

Transaction ID : SA11AI.5154

Amount of Each Receipt this Period: **250.00**

P2014

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

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

290.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 86
	<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)
Friends of George Demos

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

Mailing Address 26 Kyle Rd.

City State Zip Code
Hampton Bays NY 11946

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

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

Transaction ID : SA11AI.5174

Amount of Each Receipt this Period
50.00

P2014

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

Mailing Address 242 E. 74th St.

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
500.00

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

Transaction ID : SA11AI.5310

Amount of Each Receipt this Period
500.00

P2014

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

Mailing Address 27854 Somerset Lane

City State Zip Code
San Juan Capistrano CA 92675

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

Name of Employer Occupation
Convergence CEO

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 / 08 / 2014

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period
500.00

P2014

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 31 OF 86
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

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

Mailing Address 11371 Iager BLVD Unite 2

City State Zip Code
Fulton MD 20759

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

Name of Employer Occupation
Lockheed Martin Process Engineer

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.5315

Amount of Each Receipt this Period
250.00
 P2014

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

Mailing Address 147 Laurance Ln.

City State Zip Code
Ridge NY 11961

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5225

Amount of Each Receipt this Period
35.00
 P2014

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

Mailing Address Best Efforts

City State Zip Code
Best Efforts NY 00000

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

Name of Employer Occupation
Best Efforts Best Efforts

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 / 23 / 2014

Transaction ID : SA11AI.5330

Amount of Each Receipt this Period
200.00
 P2014

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

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

485.00

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

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

FOR LINE NUMBER: PAGE 32 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Daniel Meehan

Mailing Address 69 Bobann Dr.

City Nesconset State NY Zip Code 11767

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5182

Amount of Each Receipt this Period
 P2014 50.00

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

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

City NEW YORK State NY Zip Code 10019

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

Name of Employer Occupation
 IONIAN MANAGEMENT INC. EXECUTIVE

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 / 22 / 2014

Transaction ID : SA11AI.5094

Amount of Each Receipt this Period
 P2014 500.00

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

Mailing Address 27 Brookvale Ln.

City Lake Grove State NY Zip Code 11755

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11AI.5251

Amount of Each Receipt this Period
 P2014 20.00

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

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

570.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Margaret Nagengast		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO Box 2942		Transaction ID : SA11AI.5186
City Setauket	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 50.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 50.00	

Full Name (Last, First, Middle Initial) B. Bess Nicholas		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 33 E End Ave		Transaction ID : SA11AI.5137
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Steve Nicolaou		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1068 Atherton Dr.		Transaction ID : SA11AI.5292
City Tracy	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 1000.00
Name of Employer Self employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Christina Nikolopoulos

Mailing Address **PO Box 81**

City **Remsenburg** State **NY** Zip Code **11960**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5160

Amount of Each Receipt this Period
175.00

P2014

B. Full Name (Last, First, Middle Initial)
Gregory O'Leary

Mailing Address **1784 N. San Joaquin St.**

City **Stockton** State **CA** Zip Code **95204**

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

Name of Employer Occupation
Colliers International **Senior Vice President**

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 / 09 / 2014

Transaction ID : SA11AI.5319

Amount of Each Receipt this Period
250.00

P2014

C. Full Name (Last, First, Middle Initial)
Kenneth O'Shea

Mailing Address **425 Hampton Rd.**

City **Southampton** State **NY** Zip Code **11968**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5237

Amount of Each Receipt this Period
25.00

P2014

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 35 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
James Orphanides

Mailing Address 35 Bready Rd.

City State Zip Code
Princeton NJ 08540

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

Name of Employer Occupation
Centurion Holdings LLC President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period
 1000.00
 P2014

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

Mailing Address 467 Thrift St.

City State Zip Code
Ronkonkoma NY 11779

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10.00

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

Transaction ID : SA11AI.5267

Amount of Each Receipt this Period
 10.00
 P2014

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

Mailing Address 14 West 23rd St.

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Pan Brothers Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.5312

Amount of Each Receipt this Period
 500.00
 P2014

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

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

1510.00

**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 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Marilyn Parrillo

Mailing Address 109 Maple St

City Medford State NY Zip Code 11763

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

Name of Employer Neil L. Bellet M.D. Occupation Dr of Derm

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.5121

Amount of Each Receipt this Period
 10.00

P2014

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

Mailing Address 480 Park Ave, apt 8B

City New York State NY Zip Code 10022

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5132

Amount of Each Receipt this Period
 500.00

P2014

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

Mailing Address 4985 Peconic Bay Blvd.

City Laurel State NY Zip Code 11948

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

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

Transaction ID : SA11AI.5233

Amount of Each Receipt this Period
 25.00

P2014

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

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

535.00

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

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

FOR LINE NUMBER: PAGE 37 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Evangelina Poneros

Mailing Address 287 Oakwood Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Poneros, Esq. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period
 P2014 250.00

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

Mailing Address 10 City Place

City White Plains State NY Zip Code 10601

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

Name of Employer Leadership 100 Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5314

Amount of Each Receipt this Period
 P2014 300.00

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

Mailing Address 51 E. 400 S.

City Salt Lake City State UT Zip Code 84111

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

Name of Employer InterNet Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5093

Amount of Each Receipt this Period
 P2014 250.00

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

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

800.00

**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 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. G.A. Ranglas		Date of Receipt MM / DD / YYYY 05 / 04 / 2014
Mailing Address 3444 Camino del Rio N.		Transaction ID : SA11AI.5280
City San Diego	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 1500.00
Name of Employer Forest Park III Genpar LLC	Occupation Manager	P2014 1500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) B. Agnes Reynolds-Russo		Date of Receipt MM / DD / YYYY 05 / 21 / 2014
Mailing Address PO Box 62		Transaction ID : SA11AI.5112
City East Marion	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 35.00
Name of Employer Retired	Occupation Retired	P2014 85.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 85.00	

Full Name (Last, First, Middle Initial) C. Guntram Richter		Date of Receipt MM / DD / YYYY 05 / 26 / 2014
Mailing Address 7 Valleywood Ct. W.		Transaction ID : SA11AI.5115
City Saint James	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period P2014 35.00
Name of Employer N/A	Occupation Retired	P2014 85.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 85.00	

SUBTOTAL of Receipts This Page (optional).....	1570.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 86
	<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)
Friends of George Demos

Full Name (Last, First, Middle Initial) Kassandra Romas		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 153 Tennyson Dr.		Transaction ID : SA11AI.5348
City Short Hills	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bouras Properties	Occupation Property Manager	P2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) Lena Sampson		Date of Receipt M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 251 Dare Rd.		Transaction ID : SA11AI.5209
City Selden	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer	Occupation	P2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00	

Full Name (Last, First, Middle Initial) Donna Sarrica		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 945 5th Ave, Apt 4B		Transaction ID : SA11AI.5123
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer New Park Pizzeria & Restaurant	Occupation Owner	P2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	785.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 86
	<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)
Friends of George Demos

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

Mailing Address 82 Sheppard Ln.

City Nesconset State NY Zip Code 11767

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **20.00**

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

Transaction ID : SA11AI.5268

Amount of Each Receipt this Period
10.00

P2014

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

Mailing Address 1661 Old Country Rd.

City Riverhead State NY Zip Code 11901

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5.00**

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

Transaction ID : SA11AI.5270

Amount of Each Receipt this Period
5.00

P2014

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

Mailing Address 525 E 72nd st, Apt. 421

City New York State NY Zip Code 10021

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

Name of Employer Occupation
 New Park Pizzeria & Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

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

Transaction ID : SA11AI.5125

Amount of Each Receipt this Period
250.00

P2014

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

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

265.00

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

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

FOR LINE NUMBER: PAGE 41 OF 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
George Skoufis

Mailing Address 2886 Thornbriar Rd.

City Atlanta State GA Zip Code 30340

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5111

Amount of Each Receipt this Period
 P2014 50.00

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

Mailing Address 1800 S. Ocean Blvd.

City Pompano Beach State FL Zip Code 33062

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period
 P2014 1000.00

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

Mailing Address 10100 Trinity Parkway

City Stockton State CA Zip Code 95219

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

Name of Employer A.G. Spanos Companies Occupation Founder/retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.5068

Amount of Each Receipt this Period
 P2014 2500.00

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

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

3550.00

**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 86
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Stanley Spolski

Mailing Address 5 Mcarthur Lane

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
50.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2014

Transaction ID : SA11AI.5109

Amount of Each Receipt this Period
 P2014 50.00

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

Mailing Address 9 Settlers Way

City State Zip Code
Setauket NY 11733

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period
 P2014 35.00

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

Mailing Address 50 Sutton Place South

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Poles Tublin 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
 05 / 20 / 2014

Transaction ID : SA11AI.5275

Amount of Each Receipt this Period
 P2014 500.00

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

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

585.00

**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 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Tony Streich

Mailing Address 210 West 70th St.

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
HSBC Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : SA11AI.5091

Amount of Each Receipt this Period
200.00
P2014

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

Mailing Address 166 Village Dr.

City State Zip Code
Hauppauge NY 11788

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.5197

Amount of Each Receipt this Period
35.00
P2014

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

Mailing Address 6 Lenore Ct.

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
10.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.5263

Amount of Each Receipt this Period
10.00
P2014

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

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

245.00

**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 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Apostolos Tambakis

Mailing Address 530 E. 76th St.

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Brooklyn Central Medical Group Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 25 / 2014

Transaction ID : SA11AI.5327

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address 2912 Olive St

City State Zip Code
Washington DC 20007

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

Name of Employer Occupation
Capitol Outdoor Media

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : SA11AI.5073

Amount of Each Receipt this Period
1000.00
G2014

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

Mailing Address PO Box 1202

City State Zip Code
Southold NY 11971

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
20.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.5247

Amount of Each Receipt this Period
20.00
P2014

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

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

1270.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Christine Triant

Mailing Address 15 E. 82nd St.

City New York State NY Zip Code 10028

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 21 / 2014

Transaction ID : SA11AI.5325

Amount of Each Receipt this Period
 P2014
 250.00

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

Mailing Address 645 5th Ave #304

City New York State NY Zip Code 10022

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5083

Amount of Each Receipt this Period
 P2014
 250.00

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

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

City New York State NY Zip Code 10075

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5141

Amount of Each Receipt this Period
 P2014
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Artemios Tsismenakis

Mailing Address **PO Box 275**

City **East Marion** State **NY** Zip Code **11939**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 19 / 2014

Transaction ID : SA11AI.5178

Amount of Each Receipt this Period
50.00
 P2014

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

Mailing Address **PO Box 278**

City **Wading River** State **NY** Zip Code **11792**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **35.00**

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

Transaction ID : SA11AI.5199

Amount of Each Receipt this Period
35.00
 P2014

C. Full Name (Last, First, Middle Initial)
D.F. Tzoannos

Mailing Address **301 E 75th st.**

City **New York** State **NY** Zip Code **10021**

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

Name of Employer 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 Y Y
05 / 20 / 2014

Transaction ID : SA11AI.5143

Amount of Each Receipt this Period
250.00
 P2014

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

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

335.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Theodore Vakrinos

Mailing Address 7822 Ridgecrest Drive

City State Zip Code
ALEXANDRIA VA 22308

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

Name of Employer Occupation
Vakrinos, ESQ. Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address 2100 Linwood Avenue

City State Zip Code
Fort Lee NJ 07024

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

Name of Employer Occupation
Bounce Entertainment Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

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

Transaction ID : SA11AI.5347

Amount of Each Receipt this Period
250.00
P2014

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

Mailing Address 390 Greenwich St

City State Zip Code
New York NY 10013

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 / 20 / 2014

Transaction ID : SA11AI.5145

Amount of Each Receipt this Period
250.00
P2014

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Theodore Veru

Mailing Address **3 Bridle Way**

City **Fort Lee** State **NJ** Zip Code **07024**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period
500.00
 P2014

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

Mailing Address **49 Cleveland St**

City **Caldwell** State **NJ** Zip Code **07006**

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

Name of Employer **Executive** Occupation **Vouloumanos Finance**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5340

Amount of Each Receipt this Period
500.00
 P2014

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

Mailing Address **PO Box 2216**

City **Sag Harbor** State **NY** Zip Code **11963**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5114

Amount of Each Receipt this Period
35.00
 P2014

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

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

1035.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Jerome Wilverding

Mailing Address 4982 Bay View Cir

City Stockton State CA Zip Code 95219

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

Name of Employer San Joaquin County Occupation Auditor-controller

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.5304

Amount of Each Receipt this Period
 P2014
 500.00

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

Mailing Address PO Box 250

City Greenport State NY Zip Code 11944

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
35.00

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

Transaction ID : SA11AI.5203

Amount of Each Receipt this Period
 P2014
 35.00

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

Mailing Address 22 Knotty Oak Cir.

City Coto de Caza State CA Zip Code 92679

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

Name of Employer Zeppos Law Firm Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period
 P2014
 1500.00

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

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

2035.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 86
	<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)
Friends of George Demos

A. Full Name (Last, First, Middle Initial)
Ioannis Zervoudakis

Mailing Address 1320 York Ave. #34B

City New York State NY Zip Code 10021

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

Name of Employer Cornell Medical College Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : SA11Al.5077

Amount of Each Receipt this Period
 P2014
 200.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

200.00

58080.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 86		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. AJF and Associates		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 16 N Astor Street		Amount of Each Disbursement this Period 3,000.00 Transaction ID : SB17.5061
City Irvington State NY Zip Code 10533	Purpose of Disbursement Polling	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AJF and Associates		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 16 N Astor Street		Amount of Each Disbursement this Period 1,242.24 Transaction ID : SB17.5060
City Irvington State NY Zip Code 10533	Purpose of Disbursement Polling	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Amtrak		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 60 Massachusetts Avenue NE		Amount of Each Disbursement this Period 447.00 Transaction ID : SB17.4942
City Washington State DC Zip Code 20002	Purpose of Disbursement Train tickets	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	38474.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5050
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.5049
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5048
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5047
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5046
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5045
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5044
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5043
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00 Transaction ID : SB17.5042
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire Fee	Transaction ID : SB17.5040
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Transaction ID : SB17.5041
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement wire fee	Transaction ID : SB17.5039
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 86	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chase		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 601 Portion Road		Amount of Each Disbursement this Period 25.00
City Lake Ronkonkoma	State NY	
Zip Code 11779	Purpose of Disbursement Wire	Transaction ID : SB17.5038
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Collective		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 99 Park Avenue		Amount of Each Disbursement this Period 8974.23
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Internet Ads	Transaction ID : SB17.5033
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Edison Hotel		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014
Mailing Address 228 W 47th St		Amount of Each Disbursement this Period 533.12
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Hotel	Transaction ID : SB17.5063
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9532.35
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 57 OF 86	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Fusion Management Systems		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 95 Route 17 South		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5032
City Paramus	State NJ	
Zip Code 06752	Purpose of Disbursement Internet Ads	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Fusion Management Systems		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 95 Route 17 South		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.5031
City Paramus	State NJ	
Zip Code 06752	Purpose of Disbursement Internet Ads	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 39244.00 Transaction ID : SB17.5029
City Niskayuna	State NY	
Zip Code 12309	Purpose of Disbursement Media Buy	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	42244.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 4,567,890.12 Transaction ID : SB17.5028
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media Buy	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 1,234,567.89 Transaction ID : SB17.5027
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media buy	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. In The Field Consulting		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1520 Myron Street		Amount of Each Disbursement this Period 9,876,543.21 Transaction ID : SB17.5026
City Niskayuna State NY Zip Code 12309	Purpose of Disbursement Media Buy	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	400607.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

A. In The Field Consulting

Full Name (Last, First, Middle Initial)
Mailing Address 1520 Myron Street

City Niskayuna State NY Zip Code 12309

Purpose of Disbursement Media Buy

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 27 / 2014

Amount of Each Disbursement this Period: 258984.00

Transaction ID : SB17.5025

B. Phil Junquera

Full Name (Last, First, Middle Initial)
Mailing Address 55 Egypt Close

City E. Hampton State NY Zip Code 11937

Purpose of Disbursement Volunteer Reimbursement Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 22 / 2014

Amount of Each Disbursement this Period: 1507.82

Transaction ID : SB17.5017

C. Labels and Lists

Full Name (Last, First, Middle Initial)
Mailing Address 2500 116th Avenue NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement Voter Data

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.5021

SUBTOTAL of Disbursements This Page (optional) 262991.82

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Lowe's		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 2150 Nesconset Highway		Amount of Each Disbursement this Period 43.43 Transaction ID : SB17.4989
City Stony Brook	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Optimum		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 11 Industrial Road		Amount of Each Disbursement this Period 226.91 Transaction ID : SB17.4927
City Port Jefferson	State NY	
Zip Code 11777	Purpose of Disbursement Phone, TV, and Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Optimum		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 11 Industrial Road		Amount of Each Disbursement this Period 148.41 Transaction ID : SB17.4958
City Port Jefferson	State NY	
Zip Code 11777	Purpose of Disbursement Phone, TV, and Internet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	418.75
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 61 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 11.25		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.4924		
Purpose of Disbursement Fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Piryx			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 4.50		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.4928		
Purpose of Disbursement Fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. Piryx			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014		
Mailing Address 144 2nd St. 1st Floor			Amount of Each Disbursement this Period 4.50		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SB17.4929		
Purpose of Disbursement Fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	20.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 0.45 Transaction ID : SB17.4930
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 11.25 Transaction ID : SB17.4936
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4938
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	56.70
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 63 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4943
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4944
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.4959
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Transaction ID : SB17.4960
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Transaction ID : SB17.4961
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Transaction ID : SB17.4966
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	67.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 22.50 Transaction ID : SB17.4973
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 67.50 Transaction ID : SB17.4974
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 43.00 Transaction ID : SB17.4975
City San Francisco State CA Zip Code 94105	Purpose of Disbursement Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	133.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 86	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.60
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Transaction ID : SB17.4976
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 1.51
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Fee	Transaction ID : SB17.4977
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PSEG		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 460 E. Main Street		Amount of Each Disbursement this Period 1337.20
City Patchogue	State NY	
Zip Code 11772	Purpose of Disbursement Electric Bill	Transaction ID : SB17.5015
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1347.31
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 67 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)
A. RightOn Strategies

Mailing Address 373 South Willow Street PMB #106

City Manchester State NH Zip Code 03103

Purpose of Disbursement Phone consulting services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 19 / 2014

Amount of Each Disbursement this Period: 2887.00

Transaction ID : SB17.4964

Full Name (Last, First, Middle Initial)
B. Right On Strategies

Mailing Address 373 South Willow Street PMB #106

City Manchester State NH Zip Code 03103

Purpose of Disbursement Phones

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 22 / 2014

Amount of Each Disbursement this Period: 2887.00

Transaction ID : SB17.5014

Full Name (Last, First, Middle Initial)
c. SCM Associates

Mailing Address 1283 Main Street

City Dublin State NH Zip Code 03444

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 17719.00

Transaction ID : SB17.5012

SUBTOTAL of Disbursements This Page (optional) 23493.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chris Shannon		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1 Naro Lane		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5037
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Staff	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chris Shannon		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1 Naro Lane		Amount of Each Disbursement this Period 234.31 Transaction ID : SB17.5036
City Northport	State NY Zip Code 11768	
Purpose of Disbursement reimbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chris Shannon		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1 Naro Lane		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5035
City Northport	State NY Zip Code 11768	
Purpose of Disbursement Staff	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6234.31
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 69 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Chris Shannon		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 1 Naro Lane		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5034
City Northport	State NY	
Zip Code 11768	Purpose of Disbursement Staff	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 375.78 Transaction ID : SB17.4925
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies/stamps	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 50.27 Transaction ID : SB17.4931
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3426.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)
A. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies/stamps

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 08 / 2014

Amount of Each Disbursement this Period: 237.27

Transaction ID : SB17.4932

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 09 / 2014

Amount of Each Disbursement this Period: 4.33

Transaction ID : SB17.4933

Full Name (Last, First, Middle Initial)
c. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 16 / 2014

Amount of Each Disbursement this Period: 86.87

Transaction ID : SB17.4937

SUBTOTAL of Disbursements This Page (optional) 328.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 86		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 43.44
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4939
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 35.84
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4940
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 55.38
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4941
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	134.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 215.89
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4951
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 109.86
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4955
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period 114.66
City Lake Grove	State NY	
Zip Code 11790	Purpose of Disbursement Office supplies	Transaction ID : SB17.4962
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	440.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 86		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)
A. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 19 / 2014

Amount of Each Disbursement this Period: 140.60

Transaction ID : SB17.4965

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

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 22 / 2014

Amount of Each Disbursement this Period: 85.50

Transaction ID : SB17.4970

Full Name (Last, First, Middle Initial)
c. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 27 / 2014

Amount of Each Disbursement this Period: 303.75

Transaction ID : SB17.4978

SUBTOTAL of Disbursements This Page (optional) 529.85

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		28		2014
M M	/	D D	/	Y Y Y Y									
05		28		2014									
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Lake Grove</td> <td>NY</td> <td>11790</td> </tr> </table>		City	State	Zip Code	Lake Grove	NY	11790	<table border="1"> <tr> <td>40.05</td> </tr> </table>		40.05			
City	State	Zip Code											
Lake Grove	NY	11790											
40.05													
Purpose of Disbursement Office supplies		Transaction ID : SB17.4981											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		29		2014
M M	/	D D	/	Y Y Y Y									
05		29		2014									
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Lake Grove</td> <td>NY</td> <td>11790</td> </tr> </table>		City	State	Zip Code	Lake Grove	NY	11790	<table border="1"> <tr> <td>121.20</td> </tr> </table>		121.20			
City	State	Zip Code											
Lake Grove	NY	11790											
121.20													
Purpose of Disbursement Office supplies		Transaction ID : SB17.4982											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		29		2014
M M	/	D D	/	Y Y Y Y									
05		29		2014									
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Lake Grove</td> <td>NY</td> <td>11790</td> </tr> </table>		City	State	Zip Code	Lake Grove	NY	11790	<table border="1"> <tr> <td>236.26</td> </tr> </table>		236.26			
City	State	Zip Code											
Lake Grove	NY	11790											
236.26													
Purpose of Disbursement Office supplies		Transaction ID : SB17.4983											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	397.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Staples		M M / D D / Y Y Y Y 05 / 29 / 2014	
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period	
City State Zip Code Lake Grove NY 11790		_____ 6.52	
Purpose of Disbursement Office supplies		Transaction ID : SB17.4984	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Staples		M M / D D / Y Y Y Y 05 / 29 / 2014	
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period	
City State Zip Code Lake Grove NY 11790		_____ 106.21	
Purpose of Disbursement Office supplies		Transaction ID : SB17.4985	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Staples		M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 2100 Nesconset Highway		Amount of Each Disbursement this Period	
City State Zip Code Lake Grove NY 11790		_____ 171.35	
Purpose of Disbursement Office supplies		Transaction ID : SB17.4986	
Candidate Name		Category/Type	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	_____ 284.08
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 86		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 02 / 2014

Amount of Each Disbursement this Period 195.50

Transaction ID : SB17.4987

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 02 / 2014

Amount of Each Disbursement this Period 5.53

Transaction ID : SB17.4988

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 2100 Nesconset Highway

City Lake Grove State NY Zip Code 11790

Purpose of Disbursement Office supplies/stamps

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 04 / 2014

Amount of Each Disbursement this Period 175.36

Transaction ID : SB17.4993

SUBTOTAL of Disbursements This Page (optional) 376.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5011
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5010
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 13113.51 Transaction ID : SB17.5009
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	36000.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5008
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct mail	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5007
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct mail	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5006
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	34330.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 86
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5005
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5004
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 12492.51 Transaction ID : SB17.5003
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	35379.53
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 80 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. The Traz Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 18 Pendleton Court		Amount of Each Disbursement this Period 11443.51 Transaction ID : SB17.5002
City Medford	State NJ	
Zip Code 08055	Purpose of Disbursement Direct Mail	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 8732.00 Transaction ID : SB17.5023
City Northport	State NY	
Zip Code 11768	Purpose of Disbursement Campaign Management Consulting/reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Kevin Tschirhart		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 3 drake place		Amount of Each Disbursement this Period 8000.00 Transaction ID : SB17.5022
City Northport	State NY	
Zip Code 11768	Purpose of Disbursement Campaign Management Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28175.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Kevin Tschirhart			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014		
Mailing Address 3 drake place			Amount of Each Disbursement this Period 493.72		
City Northport	State NY	Zip Code 11768	Transaction ID : SB17.5024		
Purpose of Disbursement reimbursement		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014		
Mailing Address 1001 Hawkins Avenue			Amount of Each Disbursement this Period 50.00		
City Lake Grove	State NY	Zip Code 11755	Transaction ID : SB17.4999		
Purpose of Disbursement Postage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014		
Mailing Address 1001 Hawkins Avenue			Amount of Each Disbursement this Period 70.00		
City Lake Grove	State NY	Zip Code 11755	Transaction ID : SB17.5000		
Purpose of Disbursement Postage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	613.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1001 Hawkins Avenue

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 22 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : SB17.4998

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 1001 Hawkins Avenue

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 27 / 2014

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.4997

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 1001 Hawkins Avenue

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.4996

SUBTOTAL of Disbursements This Page (optional) 600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 86			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial)
A. USPS

Mailing Address 1001 Hawkins Avenue

City Lake Grove State NY Zip Code 11755

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 02 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.4995

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

Mailing Address 80 Soundview Drive

City Port Washington State NY Zip Code 11050

Purpose of Disbursement Staff

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.5019

Full Name (Last, First, Middle Initial)
c. Matt Varvaro

Mailing Address 80 Soundview Drive

City Port Washington State NY Zip Code 11050

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 343.27

Transaction ID : SB17.5020

SUBTOTAL of Disbursements This Page (optional) 3843.27

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 86			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of George Demos

Full Name (Last, First, Middle Initial) A. Matt Varvaro		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 80 Soundview Drive		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.5018
City Port Washington	State NY	
Zip Code 11050	Purpose of Disbursement Staff	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. William Ware and Associates		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 311 East 72nd Street		Amount of Each Disbursement this Period 9884.92 Transaction ID : SB17.4994
City New York	State NY	
Zip Code 10021	Purpose of Disbursement Tele Town Halls and Robo Calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	12884.92
TOTAL This Period (last page this line number only).....	943850.91

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4100

Friends of George Demos

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

[PERSONAL FUNDS]

Election: 2014

George G Demos

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

27

2013

none

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....

1000000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4495

Friends of George Demos

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

[PERSONAL FUNDS]

Election: 2014

George G Demos

Primary

General

Other (specify) ▼

Mailing Address

PO BOX 378

City

State

ZIP Code

Ronkonkoma

NY

11779

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 / D 30 / Y 2013 Y

M M / D D / Y none Y Y

0.00 % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

1000000.00

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

2000000.00

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