

# 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.   
**Zeldin For Congress**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼   
CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT  
 IS THIS REPORT NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  07 / 01 / 2015 through  09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Nancy Marks  
Signature of Treasurer Nancy Marks [Electronically Filed] Date  10 / 15 / 2015

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

**SUMMARY PAGE**  
of Receipts and Disbursements

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

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	583755.46	1671998.39
(b) Total Contribution Refunds (from Line 20(d)) .....	2500.00	2900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	581255.46	1669098.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	198820.38	514392.02
(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)).....	198820.38	514392.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1222659.19	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	20538.76	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Zeldin For Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	350788.96	979442.08
(ii) Unitemized.....	20489.50	75609.03
(iii) TOTAL of contributions from individuals ▶	371278.46	1055051.11
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	212477.00	616947.28
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	583755.46	1671998.39
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	1745.95	1745.95
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	585501.41	1673744.34

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	198820.38	514392.02
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 .....	1000.00	1400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	2900.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	201320.38	517292.02

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	838478.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	585501.41
25. SUBTOTAL (add Line 23 and Line 24).....	1423979.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	201320.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1222659.19

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Evan Abazis**

Mailing Address 303 E Main St

City Patchogue State NY Zip Code 11772

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

Name of Employer Med Manor Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2015

**Transaction ID : SA11AI.19669**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 225 Wireless Blvd Ste 102

City Hauppauge State NY Zip Code 11788

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.20608**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 225 Wireless Blvd Suite 102

City Hauppauge State NY Zip Code 11788

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

Name of Employer Accu Health Group Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.20608.0**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**

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

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

2150.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Ackerman,Levine,Culen,Brickman & Limmer LLP**

Mailing Address 1101 Northern Blvd Ste 400

City Great Neck	State NY	Zip Code 11021
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.21264**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 175 Great Neck Rd

City Great Neck	State NY	Zip Code 11021
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ackerman,Levine,Culen,Brinkman	Occupation Attorney
--	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2015

**Transaction ID : SA11AI.21264.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

Mailing Address 86 Bay Lane

City Water Mill	State NY	Zip Code 11976
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2015

**Transaction ID : SA11AI.20616**

Amount of Each Receipt this Period  
2700.00

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

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

3200.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 50 Cobbler Lane

City East Setauket State NY Zip Code 11733

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

Name of Employer CJM Wealth Management Occupation Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11AI.20036**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Nicholas M Auletta**

Mailing Address 15 Dickinson Avenue

City East Northport State NY Zip Code 11731

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

Name of Employer Summit Security Services, Inc Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.20316**

Amount of Each Receipt this Period  
200.00

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

Mailing Address P.O. Box 661

City Sag Harbor State NY Zip Code 11963

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : SA11AI.19687**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 8 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Esther Bak**

Mailing Address 132 Overlook Dr

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Home Maker Home Maker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : SA11AI.19861**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harris Bak**

Mailing Address 132 Overlook Dr

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Ortelius Ventures LLC Finance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : SA11AI.19874**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 132 Overlook Dr

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Ortelius Ventures LLC Finance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : SA11AI.19876**

Amount of Each Receipt this Period  
 2700.00

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

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

6900.00



**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Richard Barbarto</b>		Date of Receipt MM / DD / YYYY 08 / 26 / 2015
Mailing Address 526 Long Beach Rd		<b>Transaction ID : SA11AI.19919</b>
City St James	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BDR Management	Occupation President	
Receipt For: 2016 <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) <b>Christopher Beattie</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2015
Mailing Address 74 Leonard Street		<b>Transaction ID : SA11AI.20587</b>
City Wading Rlver	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Tekmark	Occupation Computer Programmer	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 280.00	

Full Name (Last, First, Middle Initial) <b>Robert Belfer</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2015
Mailing Address 767 Fifth Ave-46th Floor		<b>Transaction ID : SA11AI.19917</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Belfer Management LLC	Occupation Chairman	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 74 South Main Street

City Southampton State NY Zip Code 11968

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

Name of Employer Seafield Center Occupation Founder

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1160.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.19655**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

Mailing Address 74 South Main Street

City Southampton State NY Zip Code 11968

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

Name of Employer Seafield Center Occupation Founder

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1660.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.20875**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

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

Mailing Address 9 Elmhurst Dr

City Old Westbury State NY Zip Code 11568

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

Name of Employer Marchon Eyewear Occupation Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11AI.19916**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 2500.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 11 OF 229  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Alan Berger**

Mailing Address 24 Sutton Pl

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 30 2015

**Transaction ID : SA11AI.21027**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Linda Berley**

Mailing Address 600 Island Dr

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 17 2015

**Transaction ID : SA11AI.19831**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 3055 Whitehaven St, NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Blackstone Group Senior Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 29 2015

**Transaction ID : SA11AI.20511**

Amount of Each Receipt this Period  
 1700.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Wayne Berman**

Mailing Address 3055 Whitehaven St, NW

City Washington State DC Zip Code 20008

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

Name of Employer Blackstone Group Occupation Senior Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11AI.20564**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Blakeslee**

Mailing Address 833 South Country Rd

City East Patchogue State NY Zip Code 11772

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

Name of Employer Oar House Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19753**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 833 South Country Rd

City East Patchogue State NY Zip Code 11772

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

Name of Employer Oar House Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.21375**

Amount of Each Receipt this Period  
1500.00  
In-kind - Food and Beverage for Event

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Harvey Blau**

Mailing Address 712 5th Ave 18th Floor

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Griffon Corp Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19833**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 636 Whit Chapel Circle

City State Zip Code  
Charleston SC 29412

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.21271**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 636 White Chapel

City State Zip Code  
Charleston SC 29412

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

Name of Employer Occupation  
Boucher Strategies LLC Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.21271.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

2950.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Jonathan Bram</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015
Mailing Address 5026 Arlington Ave		<b>Transaction ID : SA11AI.19881</b>
City Bronx	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Global Infrastructure Partners	Occupation Private Equity Investor	
Receipt For: 2016 <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) <b>B. Edward Broidy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 26 / 2015
Mailing Address 45 Broidy Lane		<b>Transaction ID : SA11AI.19812</b>
City Southampton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <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>C. Anthony Caldara Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2015
Mailing Address 29 Richwood Lane		<b>Transaction ID : SA11AI.20307</b>
City Hauppauge	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Caldara & Sons General Contrac	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 125 Broad St

City State Zip Code  
New York NY 10004

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

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.19805**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 43 Wolf Hollow Rd

City State Zip Code  
Centereach NY 11720

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

Name of Employer Occupation  
Campolo, Middleton & McCormick Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.21054**

Amount of Each Receipt this Period  
475.00

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

Mailing Address 43 Wolf Hollow Rd

City State Zip Code  
Centereach NY 11720

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

Name of Employer Occupation  
Campolo, Middleton & McCormick Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2725.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.21361**

Amount of Each Receipt this Period  
25.00

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

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

3200.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Maria Cartiglia**

Mailing Address 47 Flintlock Drive

City State Zip Code  
Shirley NY 11967

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.21380**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Lynn Cassone**

Mailing Address 1950 Lakeland Ave

City State Zip Code  
Ronkonkoma NY 11779

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

Name of Employer Occupation  
Cassone Leasing President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19768**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 817 Fifth Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Big Apple President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.20541**

Amount of Each Receipt this Period  
2700.00

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

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

4650.00



**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. John Catsimatidis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2015
Mailing Address 817 Fifth Ave		<b>Transaction ID : SA11AI.20542</b>
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5400.00
Name of Employer Occupation Big Apple President	Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>B. Margo Catsimatidis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 817 Fifth Avenue		<b>Transaction ID : SA11AI.19819</b>
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2700.00
Name of Employer Occupation Homemaker Homemaker	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Margo Catsimatidis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 817 Fifth Avenue		<b>Transaction ID : SA11AI.19820</b>
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5400.00
Name of Employer Occupation Homemaker Homemaker	Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 10 Burham Ct

City State Zip Code  
Smithtown NY 11787

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**975.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2015**

**Transaction ID : SA11AI.19979**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Diane Charlap**

Mailing Address 16 W. 76th St

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2015**

**Transaction ID : SA11AI.19774**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 560 New Suffolk Road

City State Zip Code  
Cutchogue NY 11935

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

Name of Employer Occupation  
Braun Seafood Fish Buyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2015**

**Transaction ID : SA11AI.20454**

Amount of Each Receipt this Period  
**500.00**

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 175 Gnarled Hollow Road

City East Setauket State NY Zip Code 11733

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

Name of Employer NSHOA Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.19682**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1165 Park Ave, Apt 3-C

City New York State NY Zip Code 10128

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

Name of Employer Seven Bridges Advisors LLC Occupation Finance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11AI.20253**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 63 Wrights Mill Rd

City Armonk State NY Zip Code 10504

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

Name of Employer Kensico Capital Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19885**

Amount of Each Receipt this Period  
 1000.00

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

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

3500.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 7 Oakland St

City East Patchogue State NY Zip Code 11772

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

Name of Employer Concrete Construction LLC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19751**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 415 Madison Ave 19th Floor

City New York State NY Zip Code 10017

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

Name of Employer Circa Occupation Jewelry Store Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2015

**Transaction ID : SA11AI.19975**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 61 Avenue B

City Kings Park State NY Zip Code 11754-2506

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.20550**

Amount of Each Receipt this Period  
 100.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>Devon Cross</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2015
Mailing Address 875 5th Ave #17		<b>Transaction ID : SA11AI.19648</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Delphi Capital Mangement	Occupation Advisor	
Receipt For: 2016 <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) <b>Joanne Curley</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address 50 Cinque Lane		<b>Transaction ID : SA11AI.20470</b>
City Bayport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Homeschool Mom	Occupation Homeschool Mom	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 405.00	

Full Name (Last, First, Middle Initial) <b>John Cushman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2015
Mailing Address 107 Truberg Ave.		<b>Transaction ID : SA11AI.19818</b>
City Patchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1505.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Noshir Dacosta**

Mailing Address 9 Dorm Ct.

City State Zip Code  
Setauket NY 11733

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.19677**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Larry Davis**

Mailing Address 4 Coppereech Ln

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
Pequot Capital Management General Counsel

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21301**

Amount of Each Receipt this Period  
250.00

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

Mailing Address PO BOX 1543

City State Zip Code  
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21301.0**

Amount of Each Receipt this Period  
250.00

Ear Mark Donation  
**[MEMO ITEM]**

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Nicole Deluca</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 05 / 2015
Mailing Address 4 Malba Drive		<b>Transaction ID : SA11AI.19757</b>
City Shirley	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Suffolk County	Occupation Chief Deputy	
Receipt For: 2016 <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>B. Christina DeMarval</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2015
Mailing Address 238 E 79th St Apt 14C		<b>Transaction ID : SA11AI.19685</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Info Requested---Sent Letter	Occupation Info Requested---Sent Letter	
Receipt For: 2016 <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) <b>C. Linda Discala</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 17 Cornwallis Ct.		<b>Transaction ID : SA11AI.19741</b>
City Coram	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Linda Discala</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 17 Cornwallis Ct.		<b>Transaction ID : SA11AI.20304</b>	
City Coram	State NY	Zip Code 11727	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) <b>B. Linda Discala</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015	
Mailing Address 17 Cornwallis Ct.		<b>Transaction ID : SA11AI.20574</b>	
City Coram	State NY	Zip Code 11727	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <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) <b>C. Maura Doyle</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2015	
Mailing Address 45 Mill Creek Close		<b>Transaction ID : SA11AI.19817</b>	
City Watermill	State NY	Zip Code 11976	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Elliot Dreznick**

Mailing Address 6 Apricot Rd

City Mt Sinai State NY Zip Code 11766

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

Name of Employer Sound Gastroenterology PC Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.19675**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 117 Northside Dr

City Sag Harbor State NY Zip Code 11963

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2015

**Transaction ID : SA11AI.19815**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 120 East 81st St

City New York State NY Zip Code 10021

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

Name of Employer Time Warner Inc Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11AI.19722**

Amount of Each Receipt this Period  
 1000.00

**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 26 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>David Edman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address 1082 Broadmoor Rd		<b>Transaction ID : SA11AI.20645</b>
City Bryn Mawr	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Risk Management Partners LLC	Occupation Managing Partner	
Receipt For: 2016 <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) <b>James Eisdorfer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 02 / 2015
Mailing Address 121 East 60th St Ste 7C		<b>Transaction ID : SA11AI.19988</b>
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 James Eisdorfer D.D.S.	Occupation Dentist	
Receipt For: 2016 <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>Daniel Elstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015
Mailing Address PO Box 582		<b>Transaction ID : SA11AI.20259</b>
City Sagaponack	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Daniel Elstein, MD	Occupation Physician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Bruce Engel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 10 / 2015
Mailing Address 109A Lake Ave		<b>Transaction ID : SA11AI.19935</b>
City Tuckahoe	State NY	Zip Code 10707
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1465.00
Name of Employer Steiner Sports	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1465.00	

Full Name (Last, First, Middle Initial) <b>B. Bruce Engel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address 109A Lake Ave		<b>Transaction ID : SA11AI.21029</b>
City Tuckahoe	State NY	Zip Code 10707
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 172.10
Name of Employer Steiner Sports	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1637.10	

Full Name (Last, First, Middle Initial) <b>C. Thomas Esposito</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 23 / 2015
Mailing Address 55 Jesse Way		<b>Transaction ID : SA11AI.21263</b>
City Mt Sinai	State NY	Zip Code 11766
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer Tonys Burge Service	Occupation Marine Freight	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2637.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 10 Hill Rd

City State Zip Code  
St James NY 11780

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

Name of Employer Occupation  
Davidow Et al. Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 18 / 2015

**Transaction ID : SA11AI.20093**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jose Fanjul**

Mailing Address 1 N. Clematis Street Ste 200

City State Zip Code  
West Palm Beach NY 33401

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

Name of Employer Occupation  
Florida Crystals Corporation EVP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11AI.19716**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address P.O. Box 14

City State Zip Code  
Bridgehampton NY 11932

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

Name of Employer Occupation  
Farrell Construction Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11AI.19710**

Amount of Each Receipt this Period  
2700.00

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address P.O. Box 14

City State Zip Code  
Bridgehampton NY 11932

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

Name of Employer Occupation  
Farrell Construction Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11AI.19711**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Kristen Farrell**

Mailing Address P.O. Box 14

City State Zip Code  
Bridgehampton NY 11932

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

Name of Employer Occupation  
Farrell Construction Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11AI.19712**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address P.O. Box 14

City State Zip Code  
Bridgehampton NY 11932

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

Name of Employer Occupation  
Farrell Construction Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11AI.19713**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1601 Veterans Memorial Hwy

City State Zip Code  
Islandia NY 11749

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

Name of Employer Occupation  
Corporate Realty Services LLC President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.20665**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Arlene Fauser**

Mailing Address 33 W. 67th St Apt 7FW

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19778**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 336 South Hudson Ave.

City State Zip Code  
Los Angeles CA 90020

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

Name of Employer Occupation  
SNF Management COO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20287**

Amount of Each Receipt this Period  
2000.00

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Roger Felberbaum**

Mailing Address 800 Park Ave #6A

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
RBC Wealth Management Financial Investors

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19835**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mitchell Feldman**

Mailing Address 5 Cherry Lane

City State Zip Code  
Great Neck NY 11024

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

Name of Employer Occupation  
A.E. Feldman Associates, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.20456**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5509 St. Andrews Court

City State Zip Code  
Plano TX 75093

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

Name of Employer Occupation  
Planos Womens Healthcare Medical Doctor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19946**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 32 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 400 Andrews St Ste 500

City Rochester State NY Zip Code 14604

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

Name of Employer Flaum Management Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.20442**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gregory Florentino**

Mailing Address 111 Ocean Avenue

City Bay Shore State NY Zip Code 11706

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

Name of Employer Gregory Florentino Esq. Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19698**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 50 E. 72nd St Apt 13-14B

City New York State NY Zip Code 10021

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

Name of Employer UBS Security Occupation Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : SA11AI.19909**

Amount of Each Receipt this Period  
1000.00

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

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

2050.00



**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>William E Ford</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2015
Mailing Address 1212 Fifth Ave Apt 8A		<b>Transaction ID : SA11AI.20618</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer General Atlantic	Occupation President/CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>William E Ford</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2015
Mailing Address 1212 Fifth Ave Apt 8A		<b>Transaction ID : SA11AI.20620</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer General Atlantic	Occupation President/CEO	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>Marilyn Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2015
Mailing Address 7701 Forsyth Blvd 6th Floor		<b>Transaction ID : SA11AI.19727</b>
City St. Louis	State MT	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Marilyn Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2015	
Mailing Address 7701 Forsyth Blvd 6th Floor		<b>Transaction ID : SA11AI.19729</b>	
City State Zip Code St. Louis MT 63105	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5400.00		
Name of Employer Occupation Retired Retired	Election Cycle-to-Date 5400.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>B. Sam Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2015	
Mailing Address 7701 Forsyth Blvd 6th Floor		<b>Transaction ID : SA11AI.19730</b>	
City State Zip Code St Louis MT 63105	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00		
Name of Employer Occupation Harbour Group Founder	Election Cycle-to-Date 2700.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Sam Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2015	
Mailing Address 7701 Forsyth Blvd 6th Floor		<b>Transaction ID : SA11AI.19732</b>	
City State Zip Code St Louis MT 63105	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00		
Name of Employer Occupation Harbour Group Founder	Election Cycle-to-Date 5400.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 41 Stevens Place

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
Ducat Investment Group Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 04 / 2015

**Transaction ID : SA11AI.19877**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1 Brewster Court

City State Zip Code  
Setauket NY 11733

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 31 / 2015

**Transaction ID : SA11AI.19906**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 134 East 71st

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Friedberg Milstein Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SA11AI.19891**

Amount of Each Receipt this Period  
500.00

**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 36 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Davida Friedman**

Mailing Address 9 Willow Lane

City State Zip Code  
Great Neck NY 11023

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2015

**Transaction ID : SA11AI.21043**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1019 North Lane

City State Zip Code  
Fladwyne PA 19035

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

Name of Employer Occupation  
Duane Morris LLP Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2015

**Transaction ID : SA11AI.20653**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 27 Corwell Avenue

City State Zip Code  
Riverhead NY 11901

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
211.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11AI.20274**

Amount of Each Receipt this Period  
20.00

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

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

2970.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Sergio Galvis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 26 / 2015
Mailing Address 125 Broad St		<b>Transaction ID : SA11AI.19895</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Sullivan & Cromwell	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Ira Ganger</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 20 / 2015
Mailing Address 34 Herrick		<b>Transaction ID : SA11AI.20445</b>
City Lawrence	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Ambrex	Occupation President/CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Garone</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015
Mailing Address 35 Bob O Link Lane		<b>Transaction ID : SA11AI.20264</b>
City Northport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Kevin Gershowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 21 Old Bridge Ct		<b>Transaction ID : SA11AI.20460</b>	
City Melville	State NY	Zip Code 11747	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Gershow Recycling	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Kevin Gershowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 21 Old Bridge Ct		<b>Transaction ID : SA11AI.20461</b>	
City Melville	State NY	Zip Code 11747	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Gershow Recycling	Occupation Owner		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Marlena Gershowitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 549 Halsey Neck Lane		<b>Transaction ID : SA11AI.20458</b>	
City Southampton	State NY	Zip Code 11968	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Gershow Recycling	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7700.00
<b>TOTAL</b> This Period (last page this line number only).....	7700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Marlena Gershowitz**

Mailing Address 549 Halsey Neck Lane

City Southampton State NY Zip Code 11968

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

Name of Employer Gershow Recycling Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.20459**

Amount of Each Receipt this Period  
2300.00

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

Mailing Address 136 East 55th St

City New York State NY Zip Code 10022

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

Name of Employer Cushman & Wakefield Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11AI.20000**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 630 5th Ave 30th Floor

City New York State NY Zip Code 10111

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

Name of Employer Goldberg Lindsay & Co Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : SA11AI.19859**

Amount of Each Receipt this Period  
1000.00

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

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

4800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Craig Goldberg**

Mailing Address 1048 Park Ave

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Synterra Capital Management Private Equity

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SA11AI.19810**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason Goldberg**

Mailing Address 1631 Headquarters Plantation Dr

City State Zip Code  
Johns Island SC 29455

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

Name of Employer Occupation  
FAB.COM CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2015

**Transaction ID : SA11AI.19939**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 11 Grace Ave Ste 405

City State Zip Code  
Great Neck NY 11021

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

Name of Employer Occupation  
Lauran Associates Inc Commodities

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SA11AI.19990**

Amount of Each Receipt this Period  
250.00

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

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

750.00



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

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

FOR LINE NUMBER: PAGE 41 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 201 E 87th St Apt 7P

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Mt Sinai Med School Health Care

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19780**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Leo Goldstein**

Mailing Address 11 Spruce St

City State Zip Code  
Great Neck NY 11021

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

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

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.20559**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 115 Zaccheus Mead Lane

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.19808**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 42 OF 229  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Cecilia Goodman**

Mailing Address 18 Cypress Point Lane

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 01 2015

**Transaction ID : SA11AI.19680**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 727 Merion Square Rd

City State Zip Code  
Gladwyne PA 19035

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

Name of Employer Occupation  
SIG, LLP Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 10 2015

**Transaction ID : SA11AI.20004**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 727 Merion Square Rd

City State Zip Code  
Gladwyne PA 19035

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

Name of Employer Occupation  
SIG, LLP Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 10 2015

**Transaction ID : SA11AI.20006**

Amount of Each Receipt this Period  
2700.00

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

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

5900.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. Ken Greenberg**  
Full Name (Last, First, Middle Initial)  
Mailing Address 119 Hamlet Dr  
City Mt Sinai State NY Zip Code 11766  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Austin & Williams Occupation President  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**572.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2015  
**Transaction ID : SA11AI.20420**  
Amount of Each Receipt this Period  
**16.00**

**B. Matt Greenberg**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 Hillview Dr  
City Scarsdale State NY Zip Code 10583  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MRJ Capital Occupation Securities Analyst  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**750.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 02 / 2015  
**Transaction ID : SA11AI.19870**  
Amount of Each Receipt this Period  
**750.00**

**C. Martin Griffel**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11 Pond Park Rd  
City Great Neck State NY Zip Code 11023  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation MD  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 20 / 2015  
**Transaction ID : SA11AI.21041**  
Amount of Each Receipt this Period  
**250.00**

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

**1016.00**

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 56 S.Country Rd

City State Zip Code  
Westhampton Beach NY 11978

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

Name of Employer Occupation  
Chesterfield Associates President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11AI.20670**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jane Gural-Senders**

Mailing Address 860 Pond Lane

City State Zip Code  
Woodmere NY 11598

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

Name of Employer Occupation  
230 Fifth Ave Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 02 / 2015

**Transaction ID : SA11AI.19867**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 950 Third Ave 22nd Floor

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Juno Investments Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 25 / 2015

**Transaction ID : SA11AI.19879**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Martin Haley**

Mailing Address 29 Rustic Road

City Miller Place State NY Zip Code 11764

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

Name of Employer Town of Brookhaven Occupation Commissioner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.21377**

Amount of Each Receipt this Period  
1500.00

In-kind - Food and Beverage for Event

**B.** Full Name (Last, First, Middle Initial)  
**Joshua Harlan**

Mailing Address 28 E. 73rd St. Apt. 9C

City New York State NY Zip Code 10021

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

Name of Employer Harlan Capital Partners Occupation Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11AI.20509**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 135 Windsor Dr

City Calhoun State GA Zip Code 30701

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.20872**

Amount of Each Receipt this Period  
200.00

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

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Gilbert Harrison</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2015
Mailing Address 993 5th Ave 11th Floor		<b>Transaction ID : SA11AI.19829</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Financo, LLC	Occupation Chairman	
Receipt For: 2016 <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) <b>B. Thomas Haskell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 13 / 2015
Mailing Address 2 Fairfield Manor Dr		<b>Transaction ID : SA11AI.19692</b>
City Manorville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Hecht</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address 15 Hickory Dr		<b>Transaction ID : SA11AI.21303</b>
City Great Neck	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Businessman	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2015**

**Transaction ID : SA11AI.21303.0**

Amount of Each Receipt this Period  
**300.00**

Ear Mark Donation

**[MEMO ITEM]**

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

Mailing Address **300 Parkside Avenue**

City **Miller Place** State **NY** Zip Code **11764**

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

Name of Employer Occupation  
**Just Kids Learning Center** **Executive Director**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2266.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2015**

**Transaction ID : SA11AI.21255**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **300 Parkside Avenue**

City **Miller Place** State **NY** Zip Code **11764**

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

Name of Employer Occupation  
**Just Kids Learning Center** **Executive Director**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : SA11AI.20295**

Amount of Each Receipt this Period  
**434.00**

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

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

**2434.00**

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address 300 Parkside Avenue

City Miller Place State NY Zip Code 11764

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

Name of Employer Just Kids Learning Center Occupation Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.21357**

Amount of Each Receipt this Period  
1566.00

**B.** Full Name (Last, First, Middle Initial)  
**Ben Heller**

Mailing Address P.O. Box 320845

City Alexandria State VA Zip Code 22302

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

Name of Employer Heller Realty Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.20595**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address P.O. Box 320845

City Alexandria State VA Zip Code 22302

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

Name of Employer Heller Realty Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.20597**

Amount of Each Receipt this Period  
2700.00

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

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

6966.00



**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 305 Clarke Ave

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SA11AI.19982**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 625 Park 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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 18 / 2015

**Transaction ID : SA11AI.19839**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 8709 Burning Tree Rd

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
American Defense International Government Affairs Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 25 / 2015

**Transaction ID : SA11AI.20297**

Amount of Each Receipt this Period  
500.00

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

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

5900.00

**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 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Roger Hertog**

Mailing Address 1040-5th Ave

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 08 / 2015

**Transaction ID : SA11AI.19649**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 63 Hunting Hill Drive

City State Zip Code  
Dix Hills NY 11746

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

Name of Employer Occupation  
Sterling Floors Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11AI.20469**

Amount of Each Receipt this Period  
180.00

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

Mailing Address 150 Bradley Place Apt 211

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
GAF Industries Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2015

**Transaction ID : SA11AI.19837**

Amount of Each Receipt this Period  
2700.00

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

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

4380.00

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

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

FOR LINE NUMBER: PAGE 51 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 133 East 64th St Apt 4-B

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
The Travelers Companies Vice Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2015

**Transaction ID : SA11AI.19913**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Joy Hoffman**

Mailing Address 5308 S Franklin Circle

City State Zip Code  
Greenwood Village CO 80121

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

Name of Employer Occupation  
Arapahoe County GOP Chairwoman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11AI.19950**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 100 Blue Horizons Bluff

City State Zip Code  
Peconic NY 11958

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

Name of Employer Occupation  
Braun Seafood Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2015

**Transaction ID : SA11AI.20438**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 52 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 300 S Biscayne Blvd #4006

City Miami State FL Zip Code 33131

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

Name of Employer Hale Hamm Investments Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2015

**Transaction ID : SA11AI.19707**

Amount of Each Receipt this Period  
 700.00

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

Mailing Address 300 S Biscayne Blvd #4006

City Miami State FL Zip Code 33131

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

Name of Employer Hale Hamm Investments Occupation Investor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2015

**Transaction ID : SA11AI.19933**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 8-E Donellan Dr

City Hampton Bays State NY Zip Code 11946

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

Name of Employer Iannelli CMST Occupation General Contractor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11AI.19814**

Amount of Each Receipt this Period  
 250.00

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

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 89 Grandview Ln

City State Zip Code  
Smithtown NY 11787

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

Name of Employer Occupation  
Irwin Contracting Inc President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2015

**Transaction ID : SA11AI.20312**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 49 Lawrence Ave

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.19855**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 49 Lawrence Ave

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
JFM Realty LLC President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.19855.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

**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 54 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Joanne Jones</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2015
Mailing Address 1806 Tennyson Row		<b>Transaction ID : SA11AI.19963</b>
City Mt Pleasant	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Marketing	
Receipt For: 2016 <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>Erran Kagan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address 22 Old Pond Rd		<b>Transaction ID : SA11AI.21305</b>
City Great Neck	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Electro Industries	Occupation President	
Receipt For: 2016 <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) <b>NORPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 21 / 2015
Mailing Address PO BOX 1543		<b>Transaction ID : SA11AI.21305.0</b>
City ENGLEWOOD CLIFFS	State NJ	
FEC ID number of contributing federal political committee. C C00247403		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Ear Mark Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Abraham Kaplan**

Mailing Address 333 Sunset Ave Apt 508

City Palm Beach	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19841**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Roy Katzovicz**

Mailing Address 215 Park Ave S, 15th Floor

City New York	State NY	Zip Code 10003
------------------	-------------	-------------------

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

Name of Employer Saddle Point Group, LLC	Occupation Chairman
---	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : SA11AI.19822**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 333 Earle Ovington Blvd., Ste 900

City Uniondale	State NY	Zip Code 11553
-------------------	-------------	-------------------

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

Name of Employer Arbor Commercial Mortgage, LLC	Occupation Chairman
--	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.20440**

Amount of Each Receipt this Period  
250.00

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

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

5650.00

**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 56 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Gloria Kaylie**

Mailing Address 5 Fir Dr.

City State Zip Code  
Great Neck NY 11024

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

Name of Employer Occupation  
Mini Circuits Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20261**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Susan Kerr**

Mailing Address 76 Wood Lane

City State Zip Code  
Woodsburgh NY 11598

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : SA11AI.19904**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 76 Wood Lane

City State Zip Code  
Woodsburgh NY 11598

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : SA11AI.19905**

Amount of Each Receipt this Period  
 2700.00

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

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

7400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Marian Klein**

Mailing Address 535 Madison Ave #35

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Park Tower Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.20298**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 485 Underhill Blvd Ste 20

City State Zip Code  
Syosset NY 11791

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.20443**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 485 Underhill Blvd Ste 20

City State Zip Code  
Syosset NY 11791

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.20444**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 123 Meeting St

City Charleston State SC Zip Code 29401

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.19941**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 213 E 61st St

City New York State NY Zip Code 10065

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19782**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 16102 Red Cedar Trail

City Dallas State TX Zip Code 75248

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

Name of Employer Kramer Direct Occupation Advertisement

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2015

**Transaction ID : SA11AI.19994**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Jack Kulka</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015
Mailing Address 16 Wyandanch Blvd		<b>Transaction ID : SA11AI.21032</b>
City Smithtown	State NY	Zip Code 11787
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Kulka LLC	Occupation Builder	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>Gary Lainer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 2755 Forrester Dr.		<b>Transaction ID : SA11AI.20276</b>
City Los Angeles	State CA	Zip Code 90064
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Investments	
Receipt For: 2016 <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) <b>Morton Landowne</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 15 / 2015
Mailing Address 200 Riverside Blvd Apt 5-D		<b>Transaction ID : SA11AI.19863</b>
City New York	State NY	Zip Code 10069
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Nextbook, Inc	Occupation Executive Director	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Curtis Lane**

Mailing Address 101 Central Park West #5C

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
MTS Health Partners, LP Investment Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : SA11AI.19883**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Lassandro**

Mailing Address 128 East Meadow Road

City State Zip Code  
Baiting Hollow NY 11933

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
282.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : SA11AI.20407**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 101 Park Ave

City State Zip Code  
New York NY 10178

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

Name of Employer Occupation  
Curtis Mallet Patvost Et Al Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.21045**

Amount of Each Receipt this Period  
1000.00

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 61 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Pouya Lavian**

Mailing Address 301 East 45th Street Apt 15D

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Credit Suisse Senior Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.21259**

Amount of Each Receipt this Period  
1100.00

**B.** Full Name (Last, First, Middle Initial)  
**Pouya Lavian**

Mailing Address 301 East 45th Street Apt 15D

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Credit Suisse Senior Banker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.21260**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Law Offices of Edward Troy Esq**

Mailing Address 44 Broadway

City State Zip Code  
Greenlawn NY 11740

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20255**

Amount of Each Receipt this Period  
2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 62 OF 229  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address P.O. Box 249

City State Zip Code  
Wilmington DE 19899

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.19984**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 195 Central Ave

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
Lawrence Financial LLC Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.19984.0**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**

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

Mailing Address 555 Park Ave

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Grandparents.Com CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19843**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Leja Beach Properties LLC**

Mailing Address 38 Kings Hwy

City Hauppauge State NY Zip Code 11788

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.21277**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Bill Russell**

Mailing Address 38 Kings Hwy

City Hauppauge State NY Zip Code 11788

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

Name of Employer Occupation  
 Leja Beach Properties LLC President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.21277.0**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**

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

Mailing Address 20 Brooks Street S

City Hicksville State NY Zip Code 11801

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

Name of Employer Occupation  
 Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.20744**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Neil Levinbook**

Mailing Address 222 E 56th St Apt 5-J

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19784**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Eric Levine**

Mailing Address 16 Random Farms Circle

City State Zip Code  
Chappaqua NY 10514

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

Name of Employer Occupation  
Eiseman Levine et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : SA11AI.19656**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 200 East 65th Street

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Grammies World of Toys Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19802**

Amount of Each Receipt this Period  
 2200.00

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

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

3700.00



**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 65 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Jack Levy**

Mailing Address 820 Fifth Ave Floor 8

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
Goldman Sachs Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2015

**Transaction ID : SA11AI.21262**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jerome Levy**

Mailing Address 200 East 65th Street

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
NY Eye Surgery Center Assoc Medical Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19801**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 200 East 65th Street

City State Zip Code  
New York NY 10065

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

Name of Employer Occupation  
NY Eye Surgery Center Assoc Medical Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19925**

Amount of Each Receipt this Period  
100.00

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

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

3300.00

**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 66 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Jay Lewis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 23 / 2015
Mailing Address 55 Central Park W		<b>Transaction ID : SA11AI.19795</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <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) <b>B. Elliot Lewy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2015
Mailing Address 9 Lakeside Dr		<b>Transaction ID : SA11AI.19853</b>
City Lawrence	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Info Requested---Sent Letter	Occupation Info Requested---Sent Letter	
Receipt For: 2016 <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>C. Daniel Loeb</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 14 / 2015
Mailing Address 15 Central Park West PH39		<b>Transaction ID : SA11AI.19640</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Third Point LLC	Occupation Investment Manager	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 15 Central Park West PH39

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Third Point LLC Investment Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SA11AI.19645**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Long Island Nail & Skin Care Institute LLC**

Mailing Address 3709 Hempstead Tpke

City State Zip Code  
Levittown NY 11756

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : SA11AI.19664**

Amount of Each Receipt this Period  
650.00

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

Mailing Address 304 Dolphin Lane

City State Zip Code  
West Babylon NY 11704

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

Name of Employer Occupation  
LI Nail and Skin Institute CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : SA11AI.19664.0**

Amount of Each Receipt this Period  
650.00

**[MEMO ITEM]**

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

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

3350.00

**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 68 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Wayne Losee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015	
Mailing Address 21 Crescent Street		<b>Transaction ID : SA11AI.20544</b>	
City Yaphank	State NY	Zip Code 11980-9707	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Suffolk County	Occupation County Employee		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00		

Full Name (Last, First, Middle Initial) <b>B. Michael LoVerde</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015	
Mailing Address 1200 Tires Lane		<b>Transaction ID : SA11AI.19797</b>	
City E.Brunswick	State NJ	Zip Code 07750	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Wilkin & Guttenplan	Occupation CPA		
Receipt For: 2016 <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) <b>C. Lund Brown Enterprises LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address 5836 Oxford Rd		<b>Transaction ID : SA11AI.21281</b>	
City Longmont	State CO	Zip Code 80503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	1600.00

**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 69 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Buddy Brown**

Mailing Address 5836 Oxford Rd

City Longmont State CO Zip Code 80503

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

Name of Employer Lund Brown Enterprises LLC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11AI.21281.0**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Mackool**

Mailing Address 21 Corrigan Lane

City Greenwich State CT Zip Code 06831

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

Name of Employer Richard Mackool M.D. Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.19799**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4706 Rue Bordeaux

City Lutz State FL Zip Code 33558

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11AI.19733**

Amount of Each Receipt this Period  
1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Jeanne Maloney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2015	
Mailing Address 108 Lynn Ave		<b>Transaction ID : SA11AI.21053</b>	
City Hampton Bays	State NY	Zip Code 11946	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1350.00	
Name of Employer Housewife	Occupation Housewife		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1350.00		

Full Name (Last, First, Middle Initial) <b>B. Thomas Maloney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2015	
Mailing Address 15 Fortune Cookie Lane		<b>Transaction ID : SA11AI.20448</b>	
City Hampton Bays	State NY	Zip Code 11946	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Student	Occupation Student		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>C. Thomas Maloney</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2015	
Mailing Address 15 Fortune Cookie Lane		<b>Transaction ID : SA11AI.21051</b>	
City Hampton Bays	State NY	Zip Code 11946	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1950.00	
Name of Employer Student	Occupation Student		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4050.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Maloney**

Mailing Address 15 Fortune Cookie Lane

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Student Student

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 18 / 2015

**Transaction ID : SA11AI.21052**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Adele Malpass**

Mailing Address 275 Central Park West Apt 9B

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Home Maker Home Maker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SA11AI.19821**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 18 East 50th St

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Woodbranch Inc Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 09 / 2015

**Transaction ID : SA11AI.20637**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

**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 72 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Jed Manocherian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2015
Mailing Address 18 East 50th St		<b>Transaction ID : SA11AI.20639</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Woodbranch Inc	Occupation Real Estate	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Jonathan Manocherian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2015
Mailing Address 18 East 50th St		<b>Transaction ID : SA11AI.20640</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Baruch	Occupation Student	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>Jonathan Manocherian</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 09 / 2015
Mailing Address 18 East 50th St		<b>Transaction ID : SA11AI.20642</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Baruch	Occupation Student	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7300.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. John Mantione</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 05 / 2015
Mailing Address PO Box 345		<b>Transaction ID : SA11AI.19770</b>
City Cutchogue	State NY	
Zip Code 11935		Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 880.00
Name of Employer Reel Deals	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. Matthew Mark</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2015
Mailing Address 1120 Park Ave		<b>Transaction ID : SA11AI.19824</b>
City New York	State NY	
Zip Code 10128		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Jet Capital	Occupation Investor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Matthew Mark</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2015
Mailing Address 1120 Park Ave		<b>Transaction ID : SA11AI.19826</b>
City New York	State NY	
Zip Code 10128		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00
Name of Employer Jet Capital	Occupation Investor	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Avraham Markowitz**

Mailing Address 14 Glenwood Dr

City State Zip Code  
Great Neck NY 11021

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21307**

Amount of Each Receipt this Period  
250.00

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

Mailing Address PO BOX 1543

City State Zip Code  
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21307.0**

Amount of Each Receipt this Period  
250.00

Ear Mark Donation  
**[MEMO ITEM]**

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

Mailing Address 47 Flintlock Drive

City State Zip Code  
Shirley NY 11967

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.21379**

Amount of Each Receipt this Period  
1500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 5 Theodore Way

City State Zip Code  
Doylestown PA 18901

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

Name of Employer Occupation  
Bullpen Capital Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.20649**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 105 Augusta Dr

City State Zip Code  
Medford NY 11763

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.20422**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6 Sands Light Rd

City State Zip Code  
Sands Point NY 11050

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : SA11AI.19900**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 76 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Danielle Maurer**

Mailing Address 2507 N Vernon St

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Fierce Isakowitz and Blalock SVP

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20669**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Patrick McCormick**

Mailing Address 2 Carriage Drive

City State Zip Code  
Kings Park NY 11754

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

Name of Employer Occupation  
Campolo Middleton & McCormick Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.21056**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1212 Fifth Ave Apt 8A

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Requested name of company Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.20621**

Amount of Each Receipt this Period  
 300.00

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

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

2300.00

**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 77 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 23465 Harborview Rd  
Unit 1031

City Punta Gorda State FL Zip Code 33980

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20499**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Jason McMunn**

Mailing Address 11 Corbett Ct

City East Quogue State NY Zip Code 11942

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

Name of Employer Town of Quogue Occupation Law Enforcement

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19754**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 115 Port Ave S

City Ronkonkoma State NY Zip Code 11779

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : SA11AI.19700**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 78 OF 229  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Meltzer, Lippe, Goldstein & Breitstone, LLP**

Mailing Address 190 Willis Ave

City State Zip Code  
Mineola NY 11501

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : SA11AI.20021**

Amount of Each Receipt this Period  
600.00

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

Mailing Address 190 Willis Ave

City State Zip Code  
Mineola NY 11501

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

Name of Employer Occupation  
Meltzer, Lippe Estate Tax Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.20021.0**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

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

Mailing Address 40 Sycamore Avenue

City State Zip Code  
Lake Grove NY 11755

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

Name of Employer Occupation  
Campolo Middleton & McCormick Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2125.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.21055**

Amount of Each Receipt this Period  
1500.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Alan Miller</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2015
Mailing Address 237 Gibson Lane		<b>Transaction ID : SA11AI.21365</b>
City Sagaponack	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Universal Health Services	Occupation President	In-kind - Food and Beverages for event
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Jill Miller</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2015
Mailing Address 237 Gibson Lane		<b>Transaction ID : SA11AI.21367</b>
City Sagaponack	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.86
Name of Employer Home Maker	Occupation Home Maker	In-kind - Food and beverage for event
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 240.86	

Full Name (Last, First, Middle Initial) <b>C. Michael Minikes</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2015
Mailing Address 960 Park Ave		<b>Transaction ID : SA11AI.19851</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer JP Morgan	Occupation Investment Banker	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5640.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 941 Park Ave #2

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Moore Holdings President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 02 / 2015

**Transaction ID : SA11AI.19992**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**James J Moore**

Mailing Address 10 Debbie Trail

City State Zip Code  
Hampton Bays NY 11946

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 01 / 2015

**Transaction ID : SA11AI.19816**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 68 East 86th St Apt 6C

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
MTS Health Partners Private Equity

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SA11AI.19889**

Amount of Each Receipt this Period  
500.00

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

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

1500.00



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

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

FOR LINE NUMBER: PAGE 81 OF 229  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**Bruce Mosler**

Mailing Address 1290 Avenue of The Americas

City State Zip Code  
New York NY 10104

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

Name of Employer Occupation  
Cushman & Wakefield Real Estate Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11AI.19997**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Bruce Mosler**

Mailing Address 1290 Avenue of The Americas

City State Zip Code  
New York NY 10104

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

Name of Employer Occupation  
Cushman & Wakefield Real Estate Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11AI.19999**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 79 Madison Ave 10th Floor

City State Zip Code  
New York NY 10016

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

Name of Employer Occupation  
Ted Moudis Associates President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.19902**

Amount of Each Receipt this Period  
1000.00

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

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

6400.00

**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 82 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Elizabeth Murphy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2015	
Mailing Address 200 Atlantic Avenue		<b>Transaction ID : SA11AI.19742</b>	
City Blue Point	State NY	Zip Code 11715	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer NYS Senate	Occupation Legislative Aide		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>B. Douglas Nappi</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015	
Mailing Address 6007 Grove Dr		<b>Transaction ID : SA11AI.20666</b>	
City Alexandria	State VA	Zip Code 22307	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Nappi & Hoppe	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) <b>C. F Neu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2015	
Mailing Address 1172 Park Ave		<b>Transaction ID : SA11AI.21370</b>	
City New York	State NY	Zip Code 10128	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Info Requested Letter Sent	Occupation Info Requested Letter Sent		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 9 Badger Trail

City Coram State NY Zip Code 11727

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

Name of Employer NSHOA Occupation COO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11AI.19672**

Amount of Each Receipt this Period  
 200.00

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Nicolock Paving Stones & Retaining Walls**

Mailing Address 612 Muncy Ave

City Lindenhurst State NY Zip Code 11757

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11AI.20030**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 612 Muncy Ave

City Lindenhurst State NY Zip Code 11757

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

Name of Employer Occupation  
 Nicolock Paving Stones CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11AI.20030.0**

Amount of Each Receipt this Period  
 1000.00

[MEMO ITEM]

Amount of Each Receipt this Period  
 1000.00

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

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

1200.00

**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 84 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Victor Noce</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 1695 Roosevelt Ave.		<b>Transaction ID : SA11AI.20281</b>
City Bohemia	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NV Maintenance	Occupation Sales Management	
Receipt For: 2016 <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) <b>Cecil O'Brate</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address P.O. Box 399		<b>Transaction ID : SA11AI.21059</b>
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer American Warrior Inc	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>AEGISPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address PO BOX 26141		<b>Transaction ID : SA11AI.21059.0</b>
City ALEXANDRIA	State VA	
FEC ID number of contributing federal political committee. C C00579557		Amount of Each Receipt this Period 2700.00
Name of Employer	Occupation	Ear Mark Donation
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Cecil O'Brate</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2015	
Mailing Address P.O. Box 399		<b>Transaction ID : SA11AI.21062</b>	
City Garden City	State NY	Zip Code 67846	Amount of Each Receipt this Period _____ 2700.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer American Warrior Inc	Occupation President		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5400.00		

Full Name (Last, First, Middle Initial) <b>B. AEGISPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 30 / 2015	
Mailing Address PO BOX 26141		<b>Transaction ID : SA11AI.21062.0</b>	
City ALEXANDRIA	State VA	Zip Code 22313	Amount of Each Receipt this Period _____ 2700.00
FEC ID number of contributing federal political committee. C C00579557			
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 7800.00		Ear Mark Donation <b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. John O'Rourke</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2015	
Mailing Address 11028 Stanmore Dr		<b>Transaction ID : SA11AI.21047</b>	
City Potomac	State MD	Zip Code 20854	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Info Requested---Sent Letter	Occupation Info Requested---Sent Letter		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 3700.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Ogden**

Mailing Address 30 Georgica Association Rd

City Wainscott State NY Zip Code 11975

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

Name of Employer Wollmuth Maher & Deutsch Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : SA11AI.19678**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Samuel Packard**

Mailing Address 84 Beverly Rd

City Great Neck State NY Zip Code 11021

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

Name of Employer Samuel Packard M.D. Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : SA11AI.19786**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P.O. Box 2358

City E.Hampton State NY Zip Code 11937

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

Name of Employer Panco Mgt of NY LLC Occupation Real Estate Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : SA11AI.19845**

Amount of Each Receipt this Period  
 2700.00

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

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

5650.00

**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 87 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Barbara W Patterson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address P.O Box 87		<b>Transaction ID : SA11AI.20257</b>
City Quogue	State NY	Zip Code 11959
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <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>Barbara Peacock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 7286 Snowberry Ln		<b>Transaction ID : SA11AI.20592</b>
City Canal Winchester	State OH	Zip Code 43110
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 16.00	
Name of Employer NJ Realty Inc	Occupation Realtor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 216.00	

Full Name (Last, First, Middle Initial) <b>Paul Pennock</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2015
Mailing Address 299 Pavonia Ave.		<b>Transaction ID : SA11AI.20452</b>
City Jersey City	State NJ	Zip Code 07302
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Weitz & Luxenberg	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	416.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Elizabeth Pepperman**

Mailing Address 152 Waverly Place

City State Zip Code  
New York NY 10014

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

Name of Employer Occupation  
Sullivan & Cromwell Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.19806**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jody Perl**

Mailing Address 570 Longwood Ave.

City State Zip Code  
Glencoe IL 60022

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.20431**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 570 Longwood Ave.

City State Zip Code  
Glencoe IL 60022

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

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.20433**

Amount of Each Receipt this Period  
2700.00

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

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

6900.00



**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 89 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Sanford Perl</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015
Mailing Address 570 Longwood Ave		<b>Transaction ID : SA11AI.20428</b>
City Glencoe	State IL	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00
Name of Employer Kirkland & Ellis LLP	Occupation Attorney	Amount of Each Receipt this Period 3700.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00	

Full Name (Last, First, Middle Initial) <b>B. Sanford Perl</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015
Mailing Address 570 Longwood Ave		<b>Transaction ID : SA11AI.20430</b>
City Glencoe	State IL	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00
Name of Employer Kirkland & Ellis LLP	Occupation Attorney	Amount of Each Receipt this Period 6400.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6400.00	

Full Name (Last, First, Middle Initial) <b>C. Tina Petronio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015
Mailing Address 4 Clubhouse Circle		<b>Transaction ID : SA11AI.20414</b>
City Central Islip	State NY	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 16.00
Name of Employer Integrated Medical Pros	Occupation RN	Amount of Each Receipt this Period 208.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 208.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5416.00
<b>TOTAL</b> This Period (last page this line number only).....	5416.00

**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 90 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. James Porcelli</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 25 / 2015
Mailing Address 42 Grandview Dr		<b>Transaction ID : SA11AI.20741</b>
City Shirley	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>B. Keith Reda</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2015
Mailing Address PO Box 231		<b>Transaction ID : SA11AI.20436</b>
City Cutchogue	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Braun Seafood	Occupation Sales	
Receipt For: 2016 <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) <b>C. Clifford Riccio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015
Mailing Address 4810 25th St N		<b>Transaction ID : SA11AI.20991</b>
City Arlington	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NCTA	Occupation Vice Presidnt	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 91 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Rob Richmond**

Mailing Address 6904 Tokalon Dr

City State Zip Code  
Dallas TX 75214

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2015

**Transaction ID : SA11AI.19701**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Robinson**

Mailing Address 39 Polo Club Circle

City State Zip Code  
Denver CO 80209

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

Name of Employer Occupation  
Robinson Dairy CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2015

**Transaction ID : SA11AI.19948**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 34 Boylan Lane

City State Zip Code  
Blue Point NY 11715

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2015

**Transaction ID : SA11AI.19723**

Amount of Each Receipt this Period  
150.00

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

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

1650.00

**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 92 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Kenneth Rosenblum</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2015
Mailing Address 1125 Park Ave Apt 5-E		<b>Transaction ID : SA11AI.19827</b>
City New York	State NY	
Zip Code 10128		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Ritchie Capital	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Steven Rosenthal</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address 3125 Cathedral Ave NW		<b>Transaction ID : SA11AI.20472</b>
City Washington	State DC	
Zip Code 20008		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kaye Scholer LLP	Occupation Lawyer	
Receipt For: 2016 <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>C. Stephen Ross</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 25 Columbus Circle		<b>Transaction ID : SA11AI.20547</b>
City New York	State NY	
Zip Code 10019		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Related Companies	Occupation Real Estate Development	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3950.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Marc Rowan**

Mailing Address 927 Fifth Ave #6

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Apollo Management Investment

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : SA11AI.19887**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Herman Rowland**

Mailing Address 1 Jelly Belly Lane

City State Zip Code  
Fairfield CA 94533

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

Name of Employer Occupation  
Jelly Belly Corporation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : SA11AI.19971**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1 Jelly Belly Lane

City State Zip Code  
Fairfield CA 94533

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

Name of Employer Occupation  
Jelly Belly Corporation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2015

**Transaction ID : SA11AI.19973**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

**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 94 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Richard Ruben**

Mailing Address 600 Madison Ave 11th Floor

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Ruben Companies CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19892**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1 N. Breakers Row-434

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
Rudco Properties Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.19847**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 4500 Westgrove Dr Ste 340

City State Zip Code  
Addison TX 75001

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

Name of Employer Occupation  
Rundell Enterprises President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2015

**Transaction ID : SA11AI.19944**

Amount of Each Receipt this Period  
500.00

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

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

4200.00

**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 95 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Ruskin**

Mailing Address 5 Penn Plaza 23rd Floor

City State Zip Code  
New York NY 10001

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

Name of Employer Occupation  
CMP Group President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19788**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ricky Sandler**

Mailing Address 1185 Park Ave Apt. 16F

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Eminence Capital Investment Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2015

**Transaction ID : SA11AI.20434**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 18 Oxford Blvd

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Panor Corp President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.20449**

Amount of Each Receipt this Period  
500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 96 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Alan Schechter**

Mailing Address 55 East End Ave Apt 3A

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
FBE Management Inc. Finance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.20283**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Victoria Schiavoni**

Mailing Address 391 Ferry Road

City State Zip Code  
Sag Harbor NY 11963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
216.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2015

**Transaction ID : SA11AI.19980**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 391 Ferry Road

City State Zip Code  
Sag Harbor NY 11963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : SA11AI.20406**

Amount of Each Receipt this Period  
50.00

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

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

1100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 91 Beach Rd

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2015

**Transaction ID : SA11AI.21309**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO BOX 1543

City State Zip Code  
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 21 / 2015

**Transaction ID : SA11AI.21309.0**

Amount of Each Receipt this Period  
500.00

Ear Mark Donation  
**[MEMO ITEM]**

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

Mailing Address 50 Sutton Place S

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: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 23 / 2015

**Transaction ID : SA11AI.19789**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Walter Siebecker</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2015
Mailing Address 262 Central Park W		<b>Transaction ID : SA11AI.20779</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <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) <b>Harold Siegel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 20 / 2015
Mailing Address 303 East 57th Street		<b>Transaction ID : SA11AI.20439</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Excelsior Graphics Inc	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>William Silver</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2015
Mailing Address 230 Park Ave Ste 1550		<b>Transaction ID : SA11AI.19849</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer MNS International LLC	Occupation Investor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 254 Moriches Rd

City St James State NY Zip Code 11780

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

Name of Employer SCPD Occupation Government

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11AI.20500**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Aaron Sirulnick**

Mailing Address 3333 New Hyde Park Rd Suite 411

City New Hyde Park State NY Zip Code 11042

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

Name of Employer Ditmas Management Corp Occupation Real Estate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.20427**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1606 Camden Way

City Nichols Hill State OK Zip Code 73116

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

Name of Employer Slawson Exploration Company Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11AI.21064**

Amount of Each Receipt this Period  
**2400.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **PO BOX 26141**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00579557**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2015**

**Transaction ID : SA11AI.21064.0**

Amount of Each Receipt this Period  
**2400.00**

Ear Mark Donation

**[MEMO ITEM]**

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

Mailing Address **2109 Broadway Apt 16-144**

City **New York** State **NY** Zip Code **10023**

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

Name of Employer Occupation  
**Pinebrook Private Equity**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 28 / 2015**

**Transaction ID : SA11AI.19911**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **10 Birchwood Ln**

City **Great Neck** State **NY** Zip Code **11024**

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

Name of Employer Occupation  
**Self Employed Attorney**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 20 / 2015**

**Transaction ID : SA11AI.21311**

Amount of Each Receipt this Period  
**1500.00**

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

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

**2000.00**

**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 101 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2015**

**Transaction ID : SA11AI.21311.0**

Amount of Each Receipt this Period  
**1500.00**

Ear Mark Donation

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Charles Steinert**

Mailing Address **1521 Montclair St**

City **Charleston** State **SC** Zip Code **29407**

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

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 17 / 2015**

**Transaction ID : SA11AI.19965**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **120 East End Ave 9B**

City **New York** State **NY** Zip Code **10028**

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

Name of Employer Occupation  
**Savills Studley Inc Chairman/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 27 / 2015**

**Transaction ID : SA11AI.19894**

Amount of Each Receipt this Period  
**500.00**

**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 102 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

Mailing Address 480 Ocean Ave

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
Self Employed Businessman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.21313**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO BOX 1543

City State Zip Code  
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21313.0**

Amount of Each Receipt this Period  
 1000.00

Ear Mark Donation  
**[MEMO ITEM]**

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

Mailing Address 18 East 41st Street

City State Zip Code  
New York NY 10017

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2015

**Transaction ID : SA11AI.19804**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 103 OF 229

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

**A.** Full Name (Last, First, Middle Initial)  
**Marvin Sussman**

Mailing Address 101 Central Park West Apt 16B

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Phibro Animal Health Corp Director

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.19865**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 323

City State Zip Code  
Ocean Beach NY 11770

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.19791**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 700 Park Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Kamco Supply Corp President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.19793**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 104 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 427 Greenbriar Lane

City Charleston State SC Zip Code 29412

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.19967**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 112 West 56th St Apt 26N

City New York State NY Zip Code 10019

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

Name of Employer Trien Rosenberg Occupation CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2015

**Transaction ID : SA11AI.19977**

Amount of Each Receipt this Period  
 608.00

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

Mailing Address 249 Piping Rock Dr

City Matinecock State NY Zip Code 11560

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

Name of Employer Chartwell Hotels Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11AI.19898**

Amount of Each Receipt this Period  
 2500.00

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

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

3608.00



**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 105 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. United Mine Workers of America**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18354 Quantico Gateway Dr Ste 200  
 City State Zip Code  
 Triangle VA 22172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015  
**Transaction ID : SA11AI.19720**  
 Amount of Each Receipt this Period  
 1000.00

**B. Barry Volpert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 E 92nd St  
 City State Zip Code  
 New York NY 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Crestview Partners Finance  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015  
**Transaction ID : SA11AI.19896**  
 Amount of Each Receipt this Period  
 2700.00

**C. Cynthia K Wanger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 434  
 City State Zip Code  
 Gwynedd Valley PA 19437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Home Maker Home Maker  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015  
**Transaction ID : SA11AI.20651**  
 Amount of Each Receipt this Period  
 1000.00

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

4700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Stanley Wasserman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2015
Mailing Address 145 Hugenot St		<b>Transaction ID : SA11AI.19974</b>
City New Rochelle	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer S.W Management	Occupation President	
Receipt For: 2016 <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) <b>Vin Weber</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 7701 Ridgecrest Dr		<b>Transaction ID : SA11AI.19724</b>
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mercury LLC	Occupation Lobbyist	
Receipt For: 2016 <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) <b>Kevin Webster</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address 665 Gillette Dr		<b>Transaction ID : SA11AI.20489</b>
City E Marion	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Requested Info---Sent Letter	Occupation Requested Info---Sent Letter	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) <b>Adam Weinstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2015
Mailing Address 205 E. 85th St.		<b>Transaction ID : SA11AI.20265</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer New Mountain Capital	Occupation Managing Director	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>Howard Weiser</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 02 / 2015
Mailing Address 53 Crestwood Dr		<b>Transaction ID : SA11AI.19872</b>
City West Orange	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Charity Board Member	
Receipt For: 2015 <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) <b>Eric Weissmann</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 03 / 2015
Mailing Address P.O. Box 20650		<b>Transaction ID : SA11AI.19952</b>
City Boulder	State CO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kachi Partners	Occupation Private Equity	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 108 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 80 Beach Road

City State Zip Code  
Great Neck NY 11023

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

Name of Employer Occupation  
Bernstein Global Wealth Mgmt Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.21001**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 11 Locust Dr

City State Zip Code  
Great Neck NY 11021

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

Name of Employer Occupation  
Icon Parkin Systems VP Finance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2015

**Transaction ID : SA11AI.21315**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO BOX 1543

City State Zip Code  
ENGLEWOOD CLIFFS NJ 07632

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.21315.0**

Amount of Each Receipt this Period  
500.00

Ear Mark Donation  
**[MEMO ITEM]**

**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 109 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Marc Yehaskel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 20 / 2015
Mailing Address 9 Willow Lane		<b>Transaction ID : SA11AI.21321</b>
City Great Neck	State NY	
Zip Code 11023		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer American Ariana	Occupation Executive	
Receipt For: 2016 <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>B. Lawrence Zicarese</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2015
Mailing Address P.O. Box 732		<b>Transaction ID : SA11AI.20471</b>
City Smithtown	State NY	
Zip Code 11787		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer New York State	Occupation Assistant Chief of Police	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>C. Selig Zises</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2015
Mailing Address 333 Sun Set Ave		<b>Transaction ID : SA11AI.19646</b>
City Palm Beach	State FL	
Zip Code 33480		Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self Employed	Occupation Investor	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 229
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Laurence Zuriff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 21 / 2015
Mailing Address 1172 Park Ave		<b>Transaction ID : SA11AI.19738</b>
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Sive Points CEO	Amount of Each Receipt this Period 2700.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Laurence Zuriff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 21 / 2015
Mailing Address 1172 Park Ave		<b>Transaction ID : SA11AI.19739</b>
City State Zip Code New York NY 10128	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Sive Points CEO	Amount of Each Receipt this Period 5000.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	350788.96

**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 111 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AGC NYS Chapter Federal PAC**

Mailing Address 10 Airline Dr

City Albany State NY Zip Code 12205

FEC ID number of contributing federal political committee. **C** C00382382

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11C.20978**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015

**Transaction ID : SA11C.19934**

Amount of Each Receipt this Period  
 3500.00

**C.** Full Name (Last, First, Middle Initial)  
**ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 14600 TRINITY BLVD  
SUITE 500

City FORT WORTH State TX Zip Code 76155

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.20973**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

**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 112 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**

Mailing Address 1015 15TH ST. NW  
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11C.20629**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)**

Mailing Address 1015 15TH ST. NW  
SUITE 802

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11C.21026**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11C.20996**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00



**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 113 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATERWAYS OPERATORS-PAC**

Mailing Address 801 N. QUINCY STREET, SUITE 200

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing federal political committee. **C** C00034678

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11C.20975**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ARDA-ROC**

Mailing Address 1201 15TH STREET NW SUITE 400

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C90014036

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2015

**Transaction ID : SA11C.20625**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

**C.** Full Name (Last, First, Middle Initial)  
AXA EQUITABLE LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE (AXA EQUITABLE PAC)

Mailing Address 1290 AVENUE OF THE AMERICAS

City	State	Zip Code
NEW YORK	NY	10104

FEC ID number of contributing federal political committee. **C** C00161901

Name of Employer	Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.19961**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

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

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

\_\_\_\_\_ 7500.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**BETHPAGE FEDERAL CREDIT UNION PAC**

Mailing Address 899 SOUTH OYSTER BAY ROAD

City State Zip Code  
BETHPAGE NY 11714

FEC ID number of contributing federal political committee. **C** C00388942

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.21039**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**BLESSINGS OF LIBERTY PAC - BOL PAC**

Mailing Address 38 EXECUTIVE PARK, SUITE 390

City State Zip Code  
IRVINE CA 92614

FEC ID number of contributing federal political committee. **C** C00564658

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2015

**Transaction ID : SA11C.19959**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)**

Mailing Address 1201 15TH STREET, NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : SA11C.21275**

Amount of Each Receipt this Period  
 2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CMR POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.20994**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**CMR POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.20995**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11C.21000**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

**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 116 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address **601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : SA11C.20615**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**DEVON ENERGY CORPORATION POLITICAL ACTION COMMITTEE (DEC PAC)**

Mailing Address **333 WEST SHERIDAN**

City **OKLAHOMA CITY** State **OK** Zip Code **73102**

FEC ID number of contributing federal political committee. **C C00354753**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : SA11C.21037**

Amount of Each Receipt this Period  
**1500.00**

**C.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address **2980 FAIRVIEW PARK DRIVE**

City **FALLS CHURCH** State **VA** Zip Code **22042**

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2015**

**Transaction ID : SA11C.20623**

Amount of Each Receipt this Period  
**2500.00**

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

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

**5000.00**

**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 117 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address **942 SOUTH SHADY GROVE ROAD**

City **MEMPHIS** State **TN** Zip Code **38120**

FEC ID number of contributing federal political committee. **C C00068692**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 22 / 2015**

**Transaction ID : SA11C.19714**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address **942 SOUTH SHADY GROVE ROAD**

City **MEMPHIS** State **TN** Zip Code **38120**

FEC ID number of contributing federal political committee. **C C00068692**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 20 / 2015**

**Transaction ID : SA11C.19958**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Joe Sawicki**

Mailing Address **360 The Crescent**

City **E.Marion** State **NY** Zip Code **11939**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2015**

**Transaction ID : SA11C.19637**

Amount of Each Receipt this Period  
 1000.00

Permissible Funds

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 118 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Friends of Tom Croci**

Mailing Address P.O. Box 610

City State Zip Code  
Shirley NY 11967

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 07 / 2015

**Transaction ID : SA11C.20607**

Amount of Each Receipt this Period  
1000.00

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 03 / 2015

**Transaction ID : SA11C.20612**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SA11C.20548**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

A. Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

Transaction ID : SA11C.20997

Amount of Each Receipt this Period  
 1500.00

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS & ALLIED TRADES LEGISLATIVE EDUCATIONAL COMMITTEE

B. Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing federal political committee. **C** C90013582

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

Transaction ID : SA11C.20988

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)**

C. Mailing Address 1601 K STREET, NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

Transaction ID : SA11C.20998

Amount of Each Receipt this Period  
 1000.00

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 120 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

A. Full Name (Last, First, Middle Initial)  
**L BRANDS, INC. POLITICAL ACTION COMMITTEE (L BRANDS PAC)**

Mailing Address **THREE LIMITED PARKWAY**

City State Zip Code  
**COLUMBUS OH 43230**

FEC ID number of contributing federal political committee. **C C00214338**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 30 2015**

Transaction ID : **SA11C.21035**

Amount of Each Receipt this Period  
**2500.00**

B. Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address **2121 CRYSTAL DRIVE  
SUITE 100**

City State Zip Code  
**ARLINGTON VA 22202**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 11 2015**

Transaction ID : **SA11C.19937**

Amount of Each Receipt this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**MORGAN STANLEY POLITICAL ACTION COMMITTEE**

Mailing Address **1585 BROADWAY 39TH FLOOR**

City State Zip Code  
**NEW YORK NY 10036**

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2015**

Transaction ID : **SA11C.19954**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **4500.00**  
**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 121 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2015

**Transaction ID : SA11C.20611**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
11500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.20549**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11C.20993**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 122 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF HOME BUILDERS**

Mailing Address 1201 15TH ST NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C30001366**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : SA11C.19736**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)**

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.20635**

Amount of Each Receipt this Period  
 4000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE (NECAPAC)**

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C C00113811**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : SA11C.20983**

Amount of Each Receipt this Period  
 1500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16TH STREET NW STE 418

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11C.21049**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**OLDCASTLE MATERIALS INC. PAC**

Mailing Address 101 CONSTITUTION AVENUE  
600 W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00346353

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : SA11C.19956**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**PECKHAM INDUSTRIES, INC. FEDERAL PAC**

Mailing Address 20 HAARLEM AVENUE

City WHITE PLAINS State NY Zip Code 10603

FEC ID number of contributing federal political committee. **C** C00343681

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11C.20627**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC**

Full Name (Last, First, Middle Initial)  
PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC

Mailing Address 1150 17TH STREET NW  
SUITE 702

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00286807**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.19705**

Amount of Each Receipt this Period  
 1000.00

**B. QUICKEN LOANS INC PAC**

Full Name (Last, First, Middle Initial)  
QUICKEN LOANS INC PAC

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 620

City State Zip Code  
LANSING MI 48933

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.20633**

Amount of Each Receipt this Period  
 1000.00

**C. R.O.S.K.A.M. PAC**

Full Name (Last, First, Middle Initial)  
R.O.S.K.A.M. PAC

Mailing Address 610 S.Boulevard

City State Zip Code  
Tampa FL 33606

FEC ID number of contributing federal political committee. **C C00451294**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11C.19639**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. Full Name (Last, First, Middle Initial)**  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11C.20008**

Amount of Each Receipt this Period  
1500.00

**B. Full Name (Last, First, Middle Initial)**  
**RELIGHT AMERICA PAC**

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C C00577676**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.20561**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 50 F STREET NW  
6TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C90012063**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11C.20563**

Amount of Each Receipt this Period  
5000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Simcha NY**

Mailing Address 1412 Ave J

City State Zip Code  
Brooklyn NY 11230

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2015

**Transaction ID : SA11C.20606**

Amount of Each Receipt this Period  
1000.00

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHWEST AIRLINES PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE (SWAPA PAC)**

Mailing Address 1450 EMPIRE CENTRAL DR SUITE 737

City State Zip Code  
DALLAS TX 75247

FEC ID number of contributing federal political committee. **C** C00360669

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.20972**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Suffolk County Rest & Tavern Assos. PAC**

Mailing Address PO Box 2507

City State Zip Code  
Ronkonkoma NY 11779

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2015

**Transaction ID : SA11C.19642**

Amount of Each Receipt this Period  
500.00

Permissible Funds

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 127 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Suffolk County Rest & Tavern Assos. PAC**

Mailing Address **PO Box 2507**

City **Ronkonkoma** State **NY** Zip Code **11779**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : SA11C.21256**

Amount of Each Receipt this Period  
**3750.00**

Permissible Funds

**B.** Full Name (Last, First, Middle Initial)  
**TEXAS REPUBLICANS UNITED POLITICAL ACTION COMMITTEE (TRU PAC)**

Mailing Address **815-A BRAZOS STREET  
PMB 229**

City **AUSTIN** State **TX** Zip Code **78701**

FEC ID number of contributing federal political committee. **C C00481531**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 14 / 2015**

**Transaction ID : SA11C.20631**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **929 LONG BRIDGE DRIVE**

City **ARLINGTON** State **VA** Zip Code **22202**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 13 / 2015**

**Transaction ID : SA11C.19943**

Amount of Each Receipt this Period  
**1000.00**

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

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

**5750.00**

**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 128 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11C.20599**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11C.20600**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Financial Services Roundtable PAC**

Mailing Address 600 13th St, NW, Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11C.20990**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00



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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**TRANSPORTATION INTERMEDIARIES ASSOCIATION'S TIAPAC**

Mailing Address 1625 PRINCE ST SUITE 200

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00335091

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : SA11C.20630**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

**Transaction ID : SA11C.21258**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE**

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015

**Transaction ID : SA11C.20986**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

**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 130 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.**

Mailing Address **2525 STEMMONS FREEWAY**

City **DALLAS** State **TX** Zip Code **75207**

FEC ID number of contributing federal political committee. **C C00268904**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 26 / 2015**

**Transaction ID : SA11C.20002**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.**

Mailing Address **430 FIRST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00002881**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 21 / 2015**

**Transaction ID : SA11C.20603**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)**

Mailing Address **1501 K Street NW, Suite 1100**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 25 / 2015**

**Transaction ID : SA11C.20977**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)**

Mailing Address 24950 COUNTRY CLUB BLVD, STE 340

City NORTH OLMSTED State OH Zip Code 44070

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

**Transaction ID : SA11C.20974**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITED WATER INC. FEDERAL PAC**

Mailing Address 200 oLD HOOK ROAD

City HARRINGTON PARK State NJ Zip Code 07640

FEC ID number of contributing federal political committee. **C** C00280156

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2015

**Transaction ID : SA11C.20613**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 9800 Frederickson Road  
Building D3W

City San Antonio State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.19938**

Amount of Each Receipt this Period  
 2500.00

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

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

6500.00

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

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for each category of the  
Detailed Summary Page

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

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

**A.** Full Name (Last, First, Middle Initial)  
**WHAT A COUNTRY! PAC**

Mailing Address 824 S MILLEDGE AVE STE 101

City State Zip Code  
ATHENS GA 30605

FEC ID number of contributing federal political committee. **C** C00571646

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : SA11C.19703**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11C.19708**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**ZELDIN VICTORY COMMITTEE 2016**

Mailing Address 47 FLINTLOCK DRIVE

City State Zip Code  
SHIRLEY NY 11967

FEC ID number of contributing federal political committee. **C** C00579920

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
106727.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.21088**

Amount of Each Receipt this Period  
106727.00

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

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

109727.00

**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 133 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **1111 STEWART AVENUE**

City **BETHPAGE** State **NY** Zip Code **11714**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2015**

**Transaction ID : SA11C.21088.0**

Amount of Each Receipt this Period  
**300.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Friends of Andrew Garbarino**

Mailing Address **P.O. Box 101**

City **Bayport** State **NY** Zip Code **11705**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2015**

**Transaction ID : SA11C.21088.1**

Amount of Each Receipt this Period  
**300.00**

Permissible Funds

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Friends of Judge Flanagan**

Mailing Address **P.O. Box 677**

City **Shirley** State **NY** Zip Code **11967**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 24 / 2015**

**Transaction ID : SA11C.21088.2**

Amount of Each Receipt this Period  
**300.00**

Permissible Funds

**[MEMO ITEM]**

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

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

**0.00**

**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 134 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 14 / 2015

**Transaction ID : SA11C.21088.3**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B. Nicolock Paving Stones & Retaining Walls**

Full Name (Last, First, Middle Initial)  
Mailing Address 612 Muncy Ave

City State Zip Code  
Lindenhurst NY 11757

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SA11C.21088.4**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

**C. Teamsters Local Union No. 282**

Full Name (Last, First, Middle Initial)  
Mailing Address 2500 Marcus Ave

City State Zip Code  
Lake Success NY 11042

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SA11C.21088.5**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

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

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

0.00

**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 135 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Irene Alter**

Mailing Address 143 Shrub Hollow Road

City Roslyn State NY Zip Code 11576

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.21088.6**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Peter Anastasian**

Mailing Address 50 Cobbler Lane

City East Setauket State NY Zip Code 11733

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

Name of Employer CJM Wealth Management Occupation Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.21088.7**

Amount of Each Receipt this Period  
**300.00**

**[MEMO ITEM]**

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

Mailing Address 902B Harwood Ct

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer Burlington County Freeloaders Occupation Public Information

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.21088.8**

Amount of Each Receipt this Period  
**100.00**

**[MEMO ITEM]**

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

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

**0.00**

**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 136 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Thomas Aurrichio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2015
Mailing Address 3 Charlemagne Dr		<b>Transaction ID : SA11C.21088.9</b>
City Nesconset	State NY	Zip Code 11767
FEC ID number of contributing federal political committee.	C	
Name of Employer Kensington Vanguard	Occupation Title Insurance	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	
		Amount of Each Receipt this Period 300.00
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>Melissa Barbour</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 555 Broadhollow Rd Ste 427		<b>Transaction ID : SA11C.21088.10</b>
City Melville	State NY	Zip Code 11747
FEC ID number of contributing federal political committee.	C	
Name of Employer SMACNA LI	Occupation Executive Director	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	
		Amount of Each Receipt this Period 1000.00
		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>Marc Blitstein</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 21 / 2015
Mailing Address 55 Commerce Dr		<b>Transaction ID : SA11C.21088.11</b>
City Hauppauge	State NY	Zip Code 11788
FEC ID number of contributing federal political committee.	C	
Name of Employer ADC	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	
		Amount of Each Receipt this Period 500.00
		<b>[MEMO ITEM]</b>

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>A. Bret Blomberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 3 Gary Drive		<b>Transaction ID : SA11C.21088.12</b>
City Farmingville	State NY	Zip Code 11738
FEC ID number of contributing federal political committee.	C	
Name of Employer Professional Group Plans	Occupation Sales	Amount of Each Receipt this Period 500.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Robert Buono</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 7 Patricks Way		<b>Transaction ID : SA11C.21088.13</b>
City St James	State NY	Zip Code 11780
FEC ID number of contributing federal political committee.	C	
Name of Employer Professional Group Plans	Occupation Sales	Amount of Each Receipt this Period 300.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. Robert Buono Sr</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2015
Mailing Address 490 Wheeler Rd Ste 174		<b>Transaction ID : SA11C.21088.14</b>
City Hauppauge	State NY	Zip Code 11788
FEC ID number of contributing federal political committee.	C	
Name of Employer Liberty First Coverage	Occupation Insurance	Amount of Each Receipt this Period 600.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	<b>[MEMO ITEM]</b>

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 229
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Byrne</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 01 / 2015
Mailing Address 3 Leslie Ave		Transaction ID : SA11C.21088.15
City Florham Park	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Guardian Life Ins Company	Occupation VP/Strategic Alliances	[MEMO ITEM]
Receipt For: 2016 <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) <b>B. Joseph Calamari</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 11 / 2015
Mailing Address 14 Glen Road		Transaction ID : SA11C.21088.16
City Garden City	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.00
Name of Employer Retired	Occupation Retired	[MEMO ITEM]
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 14.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Campolo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2015
Mailing Address 43 Wolf Hollow Rd		Transaction ID : SA11C.21088.17
City Centereach	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Campolo, Middleton & McCormick	Occupation Lawyer	[MEMO ITEM]
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2225.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Robert M Cembrook**

Mailing Address 115 Windwatch Drive

City State Zip Code  
Hauppauge NY 11788

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PSL IND INC Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 30 2015

**Transaction ID : SA11C.21088.18**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Lawrence Cervellino**

Mailing Address 10 Burham Ct

City State Zip Code  
Smithtown NY 11787

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 27 2015

**Transaction ID : SA11C.21088.19**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Barry Chandler**

Mailing Address 19 Buckingham Rd

City State Zip Code  
Merrick NY 11566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nissequogue Golf Club General Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 27 2015

**Transaction ID : SA11C.21088.20**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 140 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rick Clemente**

Mailing Address 5 Claremont Ct

City State Zip Code  
Smithtown NY 11787

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Sourcing Group Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.21**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**David Cohen**

Mailing Address 86 Iceland Dr

City State Zip Code  
Huntington Station NY 11746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The D.B.L. Center Ltd Insurance Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2015

**Transaction ID : SA11C.21088.22**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Collins**

Mailing Address 88 Village Hill Drive

City State Zip Code  
Dix Hills NY 11746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AVZ CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.23**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 141 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. James Cotgreave</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 558 Portion Rd		<b>Transaction ID : SA11C.21088.24</b>
City Ronkonkoma	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cotgreave Agency	Occupation Insurance Broker	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>B. Joshua Crane</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 1 Chapman Pkwy		<b>Transaction ID : SA11C.21088.25</b>
City Stony Brook	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Stony Brook School	Occupation Head of School	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>C. Daniel Cremins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 77 Mountain Ave		<b>Transaction ID : SA11C.21088.26</b>
City Larchmont	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer H.J. Kalikow Co.	Occupation EVP	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Cremins**

Mailing Address 77 Mountain Ave

City Larchmont State NY Zip Code 10538

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Maker Occupation Home Maker

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : SA11C.21088.27**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Donna Cumella**

Mailing Address 69 Hurtin St

City Port Jefferson Station State NY Zip Code 11776

FEC ID number of contributing federal political committee. **C**

Name of Employer Suffolk County Occupation IT Manager

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.21088.28**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Frank Dalene**

Mailing Address PO Box 1071

City Wainscott State NY Zip Code 11975

FEC ID number of contributing federal political committee. **C**

Name of Employer Telemark Inc Occupation Builder

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2015

**Transaction ID : SA11C.21088.29**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 143 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Denise DeMilio</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address 27 Dallenbach Ln		<b>Transaction ID : SA11C.21088.30</b>	
City State Zip Code E. Brunswick NJ 08816	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer Occupation Professional Group Plans Sales	Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Eric Dielman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2015	
Mailing Address 31 Bowman Lane		<b>Transaction ID : SA11C.21088.31</b>	
City State Zip Code Kings Park NY 11754	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer Occupation Professional Group Plans Sales	Election Cycle-to-Date _____ 300.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. James DiGiovanna</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address PO Box 53		<b>Transaction ID : SA11C.21088.32</b>	
City State Zip Code Brightwaters NY 11718	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>	<b>[MEMO ITEM]</b>		
Name of Employer Occupation DiGiovanna Bros Landscaping President	Election Cycle-to-Date _____ 900.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Dobbins**

Mailing Address 720 S. Collier Blvd Unit 1102

City Marco Island State FL Zip Code 34145

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2015

**Transaction ID : SA11C.21088.33**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Martin Dobelle**

Mailing Address 90 West 34th St

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C**

Name of Employer Pinnacle Bionics Occupation Businessman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.21088.34**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Joan Dowdle**

Mailing Address 1407 Middle Rd #91

City Calverton State NY Zip Code 11933

FEC ID number of contributing federal political committee. **C**

Name of Employer Home Maker Occupation Home Maker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2015

**Transaction ID : SA11C.21088.35**

Amount of Each Receipt this Period  
20.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00



**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 145 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Gary Duff</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 14 / 2015
Mailing Address 96 Blydenburg Rd		<b>Transaction ID : SA11C.21088.36</b>
City Centereach	State NY	Zip Code 11720
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Gary Duff Designs LTD	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>B. Eugene Dunn</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 10 / 2015
Mailing Address 8 Franklin Avenue		<b>Transaction ID : SA11C.21088.37</b>
City Medford	State NY	Zip Code 11763
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Requested Info (Sent letter)	Occupation Requested Info	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Dunne</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 26 Oak Hill Lane		<b>Transaction ID : SA11C.21088.38</b>
City Kings Park	State NY	Zip Code 11754
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer NY Office of Court Admin	Occupation Criminal Court Judge	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony Falcone**

Mailing Address 10 Hill Rd

City State Zip Code  
St James NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Davidow Et al. Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2015

**Transaction ID : SA11C.21088.39**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Mary Flatley**

Mailing Address 44 Route 25A Apt 211

City State Zip Code  
Smithtown NY 11787

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested---Letter Sent Info Requested---Letter Sent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 10 / 2015

**Transaction ID : SA11C.21088.40**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Gary Forte**

Mailing Address 9 Brewster Ave

City State Zip Code  
Northport NY 11768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : SA11C.21088.41**

Amount of Each Receipt this Period  
1300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Friedrich**

Mailing Address 2 Leeward Ct

City Shoreham State NY Zip Code 11786

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested---Sent Letter Occupation Info Requested---Sent Letter

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

**Transaction ID : SA11C.21088.42**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Luigi Giordano**

Mailing Address 11 Excalibur Lane

City Nesconset State NY Zip Code 11767

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested---Letter Sent Occupation Info Requested---Letter Sent

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2015

**Transaction ID : SA11C.21088.43**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Jason Gold**

Mailing Address 9 Ellen Street

City Norwalk State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C**

Name of Employer Info Requested---Letter Sent Occupation Group Sales Representative

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2015

**Transaction ID : SA11C.21088.44**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 148 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>Amos Goodman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2015
Mailing Address 661 Springs Fireplace Rd		<b>Transaction ID : SA11C.21088.45</b>
City East Hampton	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Wolf Den Assoc	Occupation Consultant	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>Joseph Guistino</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 300 Madison Ave		<b>Transaction ID : SA11C.21088.46</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer PricewaterhouseCoopers	Occupation CPA	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Paul Hennings</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 7 Richard Path		<b>Transaction ID : SA11C.21088.47</b>
City St James	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Lawrence Worden Rainis & Bard	Occupation Attorney	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peter Holzer**

Mailing Address 4723 167th St

City State Zip Code  
Flushing NY 11358

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Info Requested--Sent Letter Info Requested--Sent Letter

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 11 / 2015

**Transaction ID : SA11C.21088.48**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**William Jackey**

Mailing Address P.O. Box 657

City State Zip Code  
East Moriches NY 11940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

**Transaction ID : SA11C.21088.49**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Vladimir Jaffe**

Mailing Address 244 Manhattan St

City State Zip Code  
Staten Island NY 10307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Palace Imports Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.50**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 150 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sean Joyce**

Mailing Address 141 St Marks Place Apt#3

City State Zip Code  
Brooklyn NY 11217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Group Plans Sales Rep

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.51**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Nicholas Kalikow**

Mailing Address 101 Park Ave 25th Floor

City State Zip Code  
New York NY 10178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H.J. Kalikow Co. LLC Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SA11C.21088.52**

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Nicholas Kalikow**

Mailing Address 101 Park Ave 25th Floor

City State Zip Code  
New York NY 10178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H.J. Kalikow Co. LLC Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 20 / 2015

**Transaction ID : SA11C.21088.53**

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 151 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary J Kalikow</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 101 Park Avenue		<b>Transaction ID : SA11C.21088.54</b>
City New York	State NY	
Zip Code 10178		Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5300.00	

Full Name (Last, First, Middle Initial) <b>B. Leslie Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 15 Addies Lane		<b>Transaction ID : SA11C.21088.55</b>
City Nesconset	State NY	
Zip Code 11767		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>
Name of Employer Suffolk County	Occupation Legislator	
Receipt For: 2016 <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) <b>C. Joseph Knesich</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 1606 9th Ave		<b>Transaction ID : SA11C.21088.56</b>
City Bohemia	State NY	
Zip Code 11716		Amount of Each Receipt this Period 900.00
FEC ID number of contributing federal political committee. C		<b>[MEMO ITEM]</b>
Name of Employer J Anthony Entertainment	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Kuehhas**

Mailing Address 4 Doral Lane

City State Zip Code  
Yaphank NY 11980

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
S.C. District Attorneys Office Asst District Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SA11C.21088.57**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Frank Lagrega**

Mailing Address 225 Wireless Blvd Ste 102

City State Zip Code  
Hauppauge NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Frank LaGrega Inc Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SA11C.21088.58**

Amount of Each Receipt this Period  
900.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Pouya Lavian**

Mailing Address 301 East 45th Street Apt 15D

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Credit Suisse Senior Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SA11C.21088.59**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00



**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 153 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Lefkowitz**

Mailing Address **PO Box 398**

City **Port Jefferson** State **NY** Zip Code **11777**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Camco Inc** Occupation **Real Estate**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2015**

**Transaction ID : SA11C.21088.60**

Amount of Each Receipt this Period  
**700.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Lippolis**

Mailing Address **8 Periwinkle Ct**

City **Smithtown** State **NY** Zip Code **11787**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Superior Washer & Gasket Corp** Occupation **Washer Manufacturer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2015**

**Transaction ID : SA11C.21088.61**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Carolyn Louro**

Mailing Address **2 Hunters Way**

City **Nissequogue** State **NY** Zip Code **11780**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Professional Group Plans** Occupation **Senior Executive**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 22 / 2015**

**Transaction ID : SA11C.21088.62**

Amount of Each Receipt this Period  
**2700.00**

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

**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 154 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carolyn Louro**

Mailing Address 2 Hunters Way

City State Zip Code  
Nissequogue NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Group Plans Senior Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SA11C.21088.63**

Amount of Each Receipt this Period  
2300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Luerssen**

Mailing Address 210 Mt Vernon Ave

City State Zip Code  
Medford NY 11763

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Anron Heating & AC President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.64**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Matthew Lulley**

Mailing Address 14 Barrington Place

City State Zip Code  
Melville NY 11747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Group Plans Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.65**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 155 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Joseph Maloy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address 94 Hedgerose Ln		<b>Transaction ID : SA11C.21088.66</b>	
City Hopkinton	State NH	Zip Code 03229	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Polaris Direct	Occupation President		
Receipt For: 2016 <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) <b>B. Richard Marino</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015	
Mailing Address 3 Expressway Plaza Ste 115		<b>Transaction ID : SA11C.21088.67</b>	
City Roslyn Heights	State NY	Zip Code 11577	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Ocean Rich Foods LLC	Occupation Seafood Importer		
Receipt For: 2016 <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) <b>C. Matthew Marks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 09 / 2015	
Mailing Address 17 Stuyvesant Oval 9G		<b>Transaction ID : SA11C.21088.68</b>	
City New York	State NY	Zip Code 10009	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Professional Group Plans	Occupation AE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>Charles Massimo</b>		Date of Receipt MM / DD / YYYY 07 / 23 / 2015
Mailing Address 50 Cobbler Lane		<b>Transaction ID : SA11C.21088.69</b>
City E.Setauket	State NY	Zip Code 11733
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer CJM Fiscal Management	Occupation CEO	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>Michael May</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2015
Mailing Address 34 Briaroot Drive		<b>Transaction ID : SA11C.21088.70</b>
City Smithtown	State NY	Zip Code 11787
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Requested Info (Sent letter)	Occupation Requested Info	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) <b>Martin McLaughlin</b>		Date of Receipt MM / DD / YYYY 07 / 22 / 2015
Mailing Address 31 Harris St		<b>Transaction ID : SA11C.21088.71</b>
City Bay Head	State NJ	Zip Code 08742
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer Connelly & McLaughlin	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Ann McLaughlin**

Mailing Address 31 Harris St

City State Zip Code  
Bay Head NJ 08742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Home Maker Home Maker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2015

**Transaction ID : SA11C.21088.72**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Melody**

Mailing Address 3676 Ionia St

City State Zip Code  
Seaford NY 11783

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Accuhealth Group Medical Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 24 / 2015

**Transaction ID : SA11C.21088.73**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Mercogliano**

Mailing Address 11 Rolling Meadow Lane

City State Zip Code  
Northport NY 11768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Builder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11C.21088.74**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 229  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Brett Messina**

Mailing Address 452 Third Avenue

City State Zip Code  
Bayport NY 11705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Group Plans Account Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : SA11C.21088.75**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**William Mich**

Mailing Address 18 Emmet Dr

City State Zip Code  
Stony Brook NY 11790

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Aperio President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2015

**Transaction ID : SA11C.21088.76**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Dan Moloney**

Mailing Address 19 Michele Lane

City State Zip Code  
Hauppauge NY 11788

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Moloney Funeral Homes Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11C.21088.77**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 159 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerald Murphy**

Mailing Address 339 Woodlawn Ave

City State Zip Code  
St James NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bartlett,McDonough & Monaghan Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 28 / 2015

**Transaction ID : SA11C.21088.78**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Gene Nally**

Mailing Address 107 San Juan Drive

City State Zip Code  
Hauppauge NY 11788

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : SA11C.21088.79**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Richard Nasti**

Mailing Address 42 Woodlawn Ave

City State Zip Code  
New Rochelle NY 10804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H.J Kalikow & Co, LLC. Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 26 / 2015

**Transaction ID : SA11C.21088.80**

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 160 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Maura Nasti</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2015	
Mailing Address 42 Woodlawn Ave		<b>Transaction ID : SA11C.21088.81</b>	
City New Rochelle	State NY	Zip Code 10804	Amount of Each Receipt this Period _____ 2000.00  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Home Maker	
Occupation Home Maker		Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date _____ 4600.00			

Full Name (Last, First, Middle Initial) <b>B. Cliff Nordquist</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2015	
Mailing Address 5 Vaneck Dr		<b>Transaction ID : SA11C.21088.82</b>	
City New Rochelle	State NY	Zip Code 10474	Amount of Each Receipt this Period _____ 500.00  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Just Bagels Manufacturing Inc	
Occupation President		Receipt For: 2016 <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) <b>C. Gary Onorato</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2015	
Mailing Address 166 Beverly Road		<b>Transaction ID : SA11C.21088.83</b>	
City S Huntington	State NY	Zip Code 11746	Amount of Each Receipt this Period _____ 500.00  <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Self Employed	
Occupation Builder		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date _____ 900.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Outcault**

Mailing Address 3 Hillside Ave

City St James State NY Zip Code 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Strike Force Maintenance Corp Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2015

**Transaction ID : SA11C.21088.84**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas Palk**

Mailing Address 23 Harned Road

City Commack State NY Zip Code 11725

FEC ID number of contributing federal political committee. **C**

Name of Employer Palk Electronic Inc Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2015

**Transaction ID : SA11C.21088.85**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mahesh Panchal**

Mailing Address 195 Hawthorne Ave #99

City Central Islip State NY Zip Code 11706

FEC ID number of contributing federal political committee. **C**

Name of Employer Palk Electric Inc Occupation Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2015

**Transaction ID : SA11C.21088.86**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 162 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anthony Pedicini**

Mailing Address 552 Spring Lake Dr

City State Zip Code  
Melbourne NY 32940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : SA11C.21088.87**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Kerry Phelan**

Mailing Address 3 Fox Run

City State Zip Code  
St James NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Professional Group Plans Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.88**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Evan Portnoy**

Mailing Address 36 Farmington Ln

City State Zip Code  
Melville NY 11747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Rampart Benefit Planning Insurance Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.89**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**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 163 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Bob Pospischil</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 323 Long Island Ave		<b>Transaction ID : SA11C.21088.90</b>
City Holtsville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Bissett Nursery	Occupation Owner	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>B. Douglas Reina</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2015
Mailing Address 28 Mills Rd		<b>Transaction ID : SA11C.21088.91</b>
City Stony Brook	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Artist	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Donald Rettaliata</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 148 S. Fairview Ave.		<b>Transaction ID : SA11C.21088.92</b>
City Bayport	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self Employed	Occupation Attorney	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>Terrence Revere</b>		Date of Receipt MM / DD / YYYY 07 / 23 / 2015
Mailing Address P.O. Box 656		<b>Transaction ID : SA11C.21088.93</b>
City Smithtown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Crossroad Construction	Occupation Construction	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Joseph Saggese</b>		Date of Receipt MM / DD / YYYY 07 / 27 / 2015
Mailing Address 17 Cedarfield Ter		<b>Transaction ID : SA11C.21088.94</b>
City St James	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Consulting Services Int'l	Occupation CPA	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>Albert Sapio</b>		Date of Receipt MM / DD / YYYY 07 / 28 / 2015
Mailing Address 178 Southern Blvd		<b>Transaction ID : SA11C.21088.95</b>
City Nesconset	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Arlan Damper Corp	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 229
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>Joseph Savasta</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 1350 Broadway		<b>Transaction ID : SA11C.21088.96</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer J.N. Savasta Corp	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>Joseph Savasta</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2015
Mailing Address 1350 Broadway		<b>Transaction ID : SA11C.21088.97</b>
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 J.N. Savasta Corp	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00	

Full Name (Last, First, Middle Initial) <b>Harry Schumacher</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015
Mailing Address 47 E 88th St Apt 14A		<b>Transaction ID : SA11C.21088.98</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 70.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Shepherd**

Mailing Address 44 Eisenhower Drive

City East Quogue State NY Zip Code 11942

FEC ID number of contributing federal political committee. **C**

Name of Employer Shepherd Consulting Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2015

**Transaction ID : SA11C.21088.99**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Walter Siebecker**

Mailing Address 262 Central Park W

City New York State NY Zip Code 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2015

**Transaction ID : SA11C.21088.100**

Amount of Each Receipt this Period  
**300.00**

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mark Soriano**

Mailing Address 2611 Middle Country Rd

City Centereach State NY Zip Code 11720

FEC ID number of contributing federal political committee. **C**

Name of Employer Jo-Mark Installations Inc Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2015

**Transaction ID : SA11C.21088.101**

Amount of Each Receipt this Period  
**500.00**

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Graham Stephens</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015
Mailing Address 14 Duncan Drive		<b>Transaction ID : SA11C.21088.102</b>
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Cassidy Turley	Occupation Real Estate	<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>B. Frank Tinari</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2015
Mailing Address 3 Fleetwood Dr		<b>Transaction ID : SA11C.21088.103</b>
City Huntington	State NY	Zip Code 11743
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer Tinari, O'Connell & Osborn	Occupation Attorney	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Tortoriello</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2015
Mailing Address 112 Heller Way		<b>Transaction ID : SA11C.21088.104</b>
City Montclair	State NJ	Zip Code 07043
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer Cleary G. LLP	Occupation Attorney	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 229
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Traina**

Mailing Address 9 Knolls Lane

City State Zip Code  
Manhasset NY 11030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Versatile Building Services Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11C.21088.105**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Jonathan Trichter**

Mailing Address 225 W 12th St  
Apt 5C

City State Zip Code  
New York NY 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Maeva Group Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : SA11C.21088.106**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Morris Tuchman**

Mailing Address 134 Lexington Ave

City State Zip Code  
New York NY 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Morris Tuchman ESQ Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 21 / 2015

**Transaction ID : SA11C.21088.107**

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00



**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 169 OF 229
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>Morris Tuchman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 21 / 2015
Mailing Address 134 Lexington Ave		<b>Transaction ID : SA11C.21088.108</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Morris Tuchman ESQ	Occupation Attorney	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Dennis Wall</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 15 / 2015
Mailing Address 64 Spruce Avenue		<b>Transaction ID : SA11C.21088.109</b>
City Bethpage	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 30.00	

Full Name (Last, First, Middle Initial) <b>Michael Weisenberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2015
Mailing Address 1800 Alla Vista St		<b>Transaction ID : SA11C.21088.110</b>
City Sarasota	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Pure Risk Management	Occupation Risk Manager	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 229
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Lauren Yablonski</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015	
Mailing Address 22 Summit Dr		<b>Transaction ID : SA11C.21088.111</b>	
City Huntington	State NY	Zip Code 11743	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Securities	Occupation Manager		<b>[MEMO ITEM]</b>
Receipt For: 2016 <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) <b>B. David Zeldin</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015	
Mailing Address PO Box 1128		<b>Transaction ID : SA11C.21088.112</b>	
City Bellmore	State NY	Zip Code 11710	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Investicorp Inc	Occupation President		<b>[MEMO ITEM]</b>
Receipt For: 2016 <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>C. Mark Lieberman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 01 / 2015	
Mailing Address 27 Sunset Dr		<b>Transaction ID : SA11C.21088.113</b>	
City Thornwood	State NY	Zip Code 10594	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TRA Inc	Occupation CEO		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eric Bregman**

Mailing Address P.O.Box 686

City State Zip Code  
Wainscott NY 11975

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gilmartin & Bregman Lawyer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2015

**Transaction ID : SA11C.21088.114**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Angela Lee-Moll**

Mailing Address One Mott Court

City State Zip Code  
St James NY 11780

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Housewife Housewife

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11C.21088.115**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Linda Acquavella**

Mailing Address P.O. Box 501

City State Zip Code  
Moriches NY 11955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Unemployed Legal Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : SA11C.21088.116**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Huntington Cons Pre-Primary Committee**

Mailing Address 17 Lucille Lane

City State Zip Code  
Dix Hills NY 11746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2015

**Transaction ID : SA11C.21088.117**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Alto Realty LLC**

Mailing Address 981 Sunrise Highway

City State Zip Code  
North Babylon NY 11703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 17 / 2015

**Transaction ID : SA11C.21088.118**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Meltzer, Lippe, Goldstein & Breitstone, LLP**

Mailing Address 190 Willis Ave

City State Zip Code  
Mineola NY 11501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015

**Transaction ID : SA11C.21088.119**

Amount of Each Receipt this Period  
600.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Miller & Caggiano LLP**

Mailing Address 3400 Veterans Memorial Hwy  
Suite 4

City Bohemia State NY Zip Code 11716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : SA11C.21088.120**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**John Cefaly**

Mailing Address 1290 Ave of the Americas

City New York State NY Zip Code 10104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cushman & Wakefield Real Estate Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11C.21088.121**

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**John Cefaly**

Mailing Address 1290 Ave of the Americas

City New York State NY Zip Code 10104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cushman & Wakefield Real Estate Broker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : SA11C.21088.122**

Amount of Each Receipt this Period  
2300.00

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Peter S Kalikow</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2015	
Mailing Address 101 Park Avenue 25th Floor		<b>Transaction ID : SA11C.21088.123</b>	
City New York	State NY	Zip Code 10178	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer H.J Kalikow & Co LLC	Occupation President		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) <b>B. Stephen Louro</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2015	
Mailing Address 2 Hunters Way		<b>Transaction ID : SA11C.21088.124</b>	
City Nissequogue	State NY	Zip Code 11780	Amount of Each Receipt this Period 1700.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Professional Group Plans	Occupation CEO		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>C. Stephen Louro</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2015	
Mailing Address 2 Hunters Way		<b>Transaction ID : SA11C.21088.125</b>	
City Nissequogue	State NY	Zip Code 11780	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer Professional Group Plans	Occupation CEO		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	0.00

**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 175 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Amanda Louro</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2015	
Mailing Address 55 West 25th St Apt 34J		<b>Transaction ID : SA11C.21088.126</b>	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period _____ 1700.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Group M	Occupation Jr Account Associate		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2700.00	

Full Name (Last, First, Middle Initial) <b>B. Amanda Louro</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2015	
Mailing Address 55 West 25th St Apt 34J		<b>Transaction ID : SA11C.21088.127</b>	
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period _____ 2700.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Group M	Occupation Jr Account Associate		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 5400.00	

Full Name (Last, First, Middle Initial) <b>C. Brad Rose</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 23 / 2015	
Mailing Address 2006 Lake End Rd		<b>Transaction ID : SA11C.21088.128</b>	
City Merrick	State NY	Zip Code 11566	Amount of Each Receipt this Period _____ 1300.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Pryor Cashman LLP	Occupation Attorney		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 5400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>David Sterling</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 33 Windsor Drive		<b>Transaction ID : SA11C.21088.129</b>
City Muttontown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1700.00
Name of Employer Sterling Risk	Occupation CEO	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>David Sterling</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 27 / 2015
Mailing Address 33 Windsor Drive		<b>Transaction ID : SA11C.21088.130</b>
City Muttontown	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Sterling Risk	Occupation CEO	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>Lawrence McDonnell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 30 / 2015
Mailing Address 15 Beaver Brook Dr.		<b>Transaction ID : SA11C.21088.131</b>
City Brookhaven	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer South Fork Funding	Occupation President	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>James O'Connor</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address P.O. Box 363		<b>Transaction ID : SA11C.21088.132</b>
City Great River	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Maroney O'Connor LLP	Occupation Lawyer	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Tony Sayegh Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2015
Mailing Address 5 Hewitt Avenue		<b>Transaction ID : SA11C.21088.133</b>
City Bronxville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Jamestown Associates	Occupation Consultant	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) <b>Daniel Jenks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2015
Mailing Address 46 Saxton Ave		<b>Transaction ID : SA11C.21088.134</b>
City Sayville	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Professional Group Plans	Occupation Broker	<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Lefkowitz**

Mailing Address **PO Box 398**

City **Port Jefferson** State **NY** Zip Code **11777**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Camco Inc** Occupation **Real Estate**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**07 / 16 / 2015**

**Transaction ID : SA11C.21088.135**

Amount of Each Receipt this Period  
**300.00**

**[MEMO ITEM]**

**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

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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

**212477.00**

**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 179 OF 229
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Empire National Bank**

Mailing Address 1044 William Floyd Parkway

City Shirley State NY Zip Code 11967

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1745.95

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA15.21372**

Amount of Each Receipt this Period  
 1745.95  
 Money Market Quarterly Interest

**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).....

1745.95

1745.95

**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 180 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. AmTrak</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 48.60
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Ticket	
Candidate Name <b>Zeldin For Congress</b> Category/Type 002		Transaction ID : SB17.20515
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. AmTrak</b>		Date of Disbursement MM / DD / YYYY 09 / 18 / 2015
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 48.60
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Ticket	
Candidate Name <b>Zeldin For Congress</b> Category/Type 002		Transaction ID : SB17.20111
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. AmTrak</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2015
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 352.50
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Tickets	
Candidate Name <b>Zeldin For Congress</b> Category/Type 002		Transaction ID : SB17.20136
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	449.70
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 181 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. AmTrak</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 60 Massachusetts Avenue NW		Amount of Each Disbursement this Period 48.60 <b>Transaction ID : SB17.20139</b>
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Ticket Category/Type 002	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 555 Hilton Ave Ste 106		Amount of Each Disbursement this Period 2142.17 <b>Transaction ID : SB17.21384</b>
City Baton Rouge State LA Zip Code 70808	Purpose of Disbursement Credit Card Fees Category/Type 003	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Richard Blakeslee</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 833 South Country Rd		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.21376</b>
City East Patchogue State NY Zip Code 11772	Purpose of Disbursement In-kind - Food and Beverage for Event Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3690.77
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaigns Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.20147</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Finance Director/Accounting Services	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Campaigns Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 507.35 <b>Transaction ID : SB17.20207</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Giveaways for Fundraiser	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Campaigns Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.20154</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Finance Director/Accounting Services	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15507.35
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaigns Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.20149</b>
City Shirley	State NY	
Purpose of Disbursement Finance Director/Accounting Services		Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Campaigns Unlimited</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 7500.00 <b>Transaction ID : SB17.21334</b>
City Shirley	State NY	
Purpose of Disbursement Finance Director/Accounting Services		Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 300 First St Southeast		Amount of Each Disbursement this Period 311.15 <b>Transaction ID : SB17.21387</b>
City Washington	State DC	
Purpose of Disbursement Various Lunch and Dinner Meetings		Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15311.15
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 300 First St Southeast		Amount of Each Disbursement this Period 247.04 <b>Transaction ID : SB17.21388</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Various Lunch and Dinner Meetings 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Casa Luca Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address 1099 New York Ave NW		Amount of Each Disbursement this Period 207.20 <b>Transaction ID : SB17.20226</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement Dinner Meeting 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Castle Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB17.20118</b>
City Charlotte State NC Zip Code 28226	Purpose of Disbursement New Campaign Website 004 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3454.24
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Castle Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 3264.37 <b>Transaction ID : SB17.20117</b>
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Digital Media/Web	Category/ Type 004
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Castle Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address 11105 Harrowfield Road		Amount of Each Disbursement this Period 1651.39 <b>Transaction ID : SB17.20119</b>
City Charlotte	State NC	
Zip Code 28226	Purpose of Disbursement Digital Media/Domain Renewals	Category/ Type 004
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Citgo Shirley</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2015
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : SB17.20180</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3264.37
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Citgo Shirley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 56.24 <b>Transaction ID : SB17.20184</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Citgo Shirley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2015
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 31.00 <b>Transaction ID : SB17.20163</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Citgo Shirley</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 28.75 <b>Transaction ID : SB17.20223</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115.99
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Citgo Shirley</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 980 Montauk Highway		Amount of Each Disbursement this Period 14.11
City Shirley	State NY	
Purpose of Disbursement Gas		Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20197
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Clarity 47 LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 145 West 47th St		Amount of Each Disbursement this Period 45.50
City New York	State NY	
Purpose of Disbursement Parking Garage Fee		Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20188
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. Clarity 47 LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 145 West 47th St		Amount of Each Disbursement this Period 45.50
City New York	State NY	
Purpose of Disbursement Parking Garage		Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20195
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	105.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 188 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Clarity 47 LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2015
Mailing Address 145 West 47th St		Amount of Each Disbursement this Period 46.50
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Parking Garage Fee	Transaction ID : SB17.20201
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. James Emanuele</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 207 Gibbs Pond Road		Amount of Each Disbursement this Period 13.72
City Nesconset	State NY	
Zip Code 11767	Purpose of Disbursement Gas	Transaction ID : SB17.20150
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 259.90
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising/Social Media	Transaction ID : SB17.20155
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	320.12
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 38.50 <b>Transaction ID : SB17.20175</b>
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising/Social Media	Category/ Type 004
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 404.55 <b>Transaction ID : SB17.20177</b>
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising/Social Media	Category/ Type 004
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 425.76 <b>Transaction ID : SB17.20196</b>
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web Advertising/Social Media	Category/ Type 004
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	868.81
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 28.07 <b>Transaction ID : SB17.20169</b>
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 28.34 <b>Transaction ID : SB17.20174</b>
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 28.34 <b>Transaction ID : SB17.20185</b>
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	84.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period ..... 19.21
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package	
Candidate Name <b>Zeldin For Congress</b>	Category/Type 001	<b>Transaction ID : SB17.20193</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period ..... 32.19
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package	
Candidate Name <b>Zeldin For Congress</b>	Category/Type 001	<b>Transaction ID : SB17.20198</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period ..... 27.80
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package	
Candidate Name <b>Zeldin For Congress</b>	Category/Type 001	<b>Transaction ID : SB17.20517</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	..... 79.20
<b>TOTAL</b> This Period (last page this line number only) .....	.....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 29.75 <b>Transaction ID : SB17.20521</b>
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Fed Ex Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2015
Mailing Address 3460 Veterans Memorial Highway		Amount of Each Disbursement this Period 27.59 <b>Transaction ID : SB17.20527</b>
City Bohemia State NY Zip Code 11716	Purpose of Disbursement Overnight Package Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. First Virginia Community Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 11325 Random Hills Rd Suite 240		Amount of Each Disbursement this Period 14.10 <b>Transaction ID : SB17.21014</b>
City Fairfax State VA Zip Code 22030	Purpose of Disbursement Bank Service Charges Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	71.44
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. First Virginia Community Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 11325 Random Hills Rd Suite 240		Amount of Each Disbursement this Period 11.60 <b>Transaction ID : SB17.21006</b>
City State Zip Code Fairfax VA 22030	Purpose of Disbursement Bank Service Charges 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Global Payments</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period 119.45 <b>Transaction ID : SB17.21015</b>
City State Zip Code Rockville MD 20855	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Global Payments</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period 83.32 <b>Transaction ID : SB17.21013</b>
City State Zip Code Rockville MD 20855	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	214.37
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Global Payments</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 10705 Red Run Blvd		Amount of Each Disbursement this Period 76.70
City Rockville	State MD	
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.21005
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. GMG Printing &amp; Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2015
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1886.68
City Shirley	State NY	
Purpose of Disbursement Invites/Envelopes/Postage	Category/ Type 003	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20113
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. GMG Printing &amp; Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1064.98
City Shirley	State NY	
Purpose of Disbursement Ink/Toner/Paper	Category/ Type 001	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20208
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3028.36
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 195 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. GMG Printing &amp; Marketing</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.20112</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Invites	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. GMG Printing &amp; Marketing</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 1020.03 <b>Transaction ID : SB17.20211</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Ink/Toner/Paper	Category/ Type 006
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Grand Hyatt Washington</b>		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 1000 H Street NW		Amount of Each Disbursement this Period 731.25 <b>Transaction ID : SB17.20129</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Hotel Stay	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2001.28
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Grand Hyatt Washington</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 1000 H Street NW		Amount of Each Disbursement this Period 731.25 <b>Transaction ID : SB17.21336</b>
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Hotel Stay	Category/Type 002	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Martin Haley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 29 Rustic Road		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.21378</b>
City Miller Place	State NY Zip Code 11764	
Purpose of Disbursement In-kind - Food and Beverage for Event	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Hamilton Crowne Plaza Washington DC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 1001 14th St NW		Amount of Each Disbursement this Period 1546.36 <b>Transaction ID : SB17.20540</b>
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Hotel Stay	Category/Type 002	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3777.61
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Hudson Hotel</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015
Mailing Address 356 West 58th St		Amount of Each Disbursement this Period 45.90
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Dinner	<b>Transaction ID : SB17.20189</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Hyatt Hotel Washington</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 1000 H St NW		Amount of Each Disbursement this Period 342.36
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Hotel Stay	<b>Transaction ID : SB17.20529</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. Hyatt Hotel Washington</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 1000 H St NW		Amount of Each Disbursement this Period 54.07
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Dinner Meeting	<b>Transaction ID : SB17.20531</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	442.33
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 198 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Jet Blue</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address JFK Expressway		Amount of Each Disbursement this Period 174.10
City New York	State NY	
Zip Code 11430	Purpose of Disbursement Airfare	Transaction ID : SB17.20191
Candidate Name <b>Zeldin For Congress</b>	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Jet Blue</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2015
Mailing Address JFK Expressway		Amount of Each Disbursement this Period 39.95
City New York	State NY	
Zip Code 11430	Purpose of Disbursement Internet charge on Flight	Transaction ID : SB17.20243
Candidate Name <b>Zeldin For Congress</b>	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. Lighthouse Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 121 Railroad Ave		Amount of Each Disbursement this Period 50.00
City Bayshore	State NY	
Zip Code 11706	Purpose of Disbursement Rent Adjustment	Transaction ID : SB17.20123
Candidate Name <b>Zeldin For Congress</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	264.05
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 229			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Lighthouse Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 121 Railroad Ave		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.20126</b>
City Bayshore State NY Zip Code 11706	Purpose of Disbursement Rent 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Lighthouse Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 121 Railroad Ave		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.20122</b>
City Bayshore State NY Zip Code 11706	Purpose of Disbursement Rent 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Lighthouse Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address 121 Railroad Ave		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB17.20127</b>
City Bayshore State NY Zip Code 11706	Purpose of Disbursement Political Director and Consulting 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3050.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Lighthouse Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address 121 Railroad Ave		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.20121</b>
City Bayshore State NY Zip Code 11706	Purpose of Disbursement Rent 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Macademia Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 718 7th Street NW		Amount of Each Disbursement this Period 10777.06 <b>Transaction ID : SB17.20120</b>
City Washington State DC Zip Code 20001	Purpose of Disbursement National Fundraising Exepenses 003 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Nancy Marks</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address 47 Flintlock Drive		Amount of Each Disbursement this Period 160.00 <b>Transaction ID : SB17.20235</b>
City Shirley State NY Zip Code 11967	Purpose of Disbursement Reimbursement Check 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11487.06
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 201 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. The Oar Steak &amp; Seafood</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address 264 West Ave		Amount of Each Disbursement this Period 160.00
City Patchogue State NY Zip Code 11772	Purpose of Disbursement Gratuity Paid for Fundraiser	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20235.0  [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 003		

Full Name (Last, First, Middle Initial) <b>B. McLaughlin &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 9427.00
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Estimate-Surveys/Interviews	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20114
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

Full Name (Last, First, Middle Initial) <b>c. McLaughlin &amp; Associates Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 566 South Route 303		Amount of Each Disbursement this Period 9000.00
City Blauvelt State NY Zip Code 10913	Purpose of Disbursement Surveys	
Candidate Name <b>Zeldin For Congress</b>		Transaction ID : SB17.20172
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 005		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18427.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.21017</b>
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Printing and Mail Shop	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2015
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 821.40 <b>Transaction ID : SB17.21018</b>
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Printing and Mail Shop	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 821.40 <b>Transaction ID : SB17.21401</b>
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Printing and Mail Shop	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2642.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2015
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 786.43 <b>Transaction ID : SB17.21400</b>
City Dulles	State VA	
Purpose of Disbursement Printing & Mailshop	Category/ Type 003	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. MDI Imaging &amp; Mail</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 1821.85 <b>Transaction ID : SB17.21011</b>
City Dulles	State VA	
Purpose of Disbursement Printing & Mailshop	Category/ Type 003	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. Alan Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 237 Gibson Lane		Amount of Each Disbursement this Period 2700.00 <b>Transaction ID : SB17.21366</b>
City Sagaponack	State NY	
Purpose of Disbursement In-kind - Food and Beverages for event	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5308.28
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 229			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Jill Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2015
Mailing Address 237 Gibson Lane		Amount of Each Disbursement this Period 240.86 <b>Transaction ID : SB17.21368</b>
City Sagaponack	State NY	
Purpose of Disbursement In-kind - Food and beverage for event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. New York Mets</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : SB17.20213</b>
City Flushing	State NY	
Purpose of Disbursement Fundraiser		Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. New York Mets</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : SB17.20214</b>
City Flushing	State NY	
Purpose of Disbursement Fundraiser		Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9240.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 229			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. New York Mets</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 1155.00 <b>Transaction ID : SB17.20217</b>
City Flushing	State NY	
Zip Code 11368	Purpose of Disbursement Fundraiser	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. New York Mets</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 1450.00 <b>Transaction ID : SB17.20218</b>
City Flushing	State NY	
Zip Code 11368	Purpose of Disbursement Fundraiser	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>C. New York Mets</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.20516</b>
City Flushing	State NY	
Zip Code 11368	Purpose of Disbursement Deposit for Fiundraiser	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4105.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 206 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. New York Mets</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2015
Mailing Address NY Mets Ticket Office CitiField		Amount of Each Disbursement this Period 4684.05 <b>Transaction ID : SB17.20519</b>
City Flushing	State NY	
Zip Code 11368	Purpose of Disbursement Fundraiser	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Optimum</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 1111 Stewart Ave		Amount of Each Disbursement this Period 214.28 <b>Transaction ID : SB17.20146</b>
City Bethpage	State NY	
Zip Code 11714	Purpose of Disbursement TV/Internet/Phone	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. PDQ Print and Mail Services</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address P.O Box 245		Amount of Each Disbursement this Period 2815.48 <b>Transaction ID : SB17.19927</b>
City Bohemia	State NY	
Zip Code 11716	Purpose of Disbursement Invitations, Stationary and envelopes	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7713.81
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Pepperoni Grill</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 485 Waverly Ave		Amount of Each Disbursement this Period 69.03 <b>Transaction ID : SB17.20237</b>
City Patchogue State NY Zip Code 11772	Purpose of Disbursement Lunch for Interns Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Pepperoni Grill</b>		Date of Disbursement MM / DD / YYYY 09 / 02 / 2015
Mailing Address 485 Waverly Ave		Amount of Each Disbursement this Period 49.55 <b>Transaction ID : SB17.20234</b>
City Patchogue State NY Zip Code 11772	Purpose of Disbursement Lunch for Volunteers Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Poland Spring</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2015
Mailing Address P.O Box 856192		Amount of Each Disbursement this Period 132.55 <b>Transaction ID : SB17.20140</b>
City Louisville State KY Zip Code 40285	Purpose of Disbursement Water for Office Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	251.13
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 208 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Poland Spring</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address P.O Box 856192		Amount of Each Disbursement this Period 142.33 <b>Transaction ID : SB17.20535</b>
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement Water for office	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Postage for Direct Mail Fundraising</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 20130 Lakeview Ctr Plaza Ste 300		Amount of Each Disbursement this Period 16.27 <b>Transaction ID : SB17.21007</b>
City Ashburn	State VA	
Zip Code 20147	Purpose of Disbursement Service Fees--Postage	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Postage for Direct Mail Fundraising</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 20130 Lakeview Ctr Plaza Ste 300		Amount of Each Disbursement this Period 1084.98 <b>Transaction ID : SB17.21008</b>
City Ashburn	State VA	
Zip Code 20147	Purpose of Disbursement Postage & Delivery	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1243.58
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 209 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial)  
**A. Postage for Direct Mail Fundraising**

Mailing Address 20130 Lakeview Ctr Plaza Ste 300

City Ashburn State VA Zip Code 20147

Purpose of Disbursement Shipping Expense

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 09 / 17 / 2015

Amount of Each Disbursement this Period: 13.37

Transaction ID : SB17.21010

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Republic Strategies LLC**

Mailing Address 412 S.Capitol St SE, Suite B

City Washington State DC Zip Code 20003

Purpose of Disbursement Commission

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 08 / 14 / 2015

Amount of Each Disbursement this Period: 17981.00

Transaction ID : SB17.20204

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. Republic Strategies LLC**

Mailing Address 412 S.Capitol St SE, Suite B

City Washington State DC Zip Code 20003

Purpose of Disbursement Commission

Candidate Name **Zeldin For Congress**

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: NY District: 01

Date of Disbursement: 09 / 04 / 2015

Amount of Each Disbursement this Period: 13886.60

Transaction ID : SB17.20205

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 31880.97

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Republic Strategies LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 412 S.Capitol St SE, Suite B		Amount of Each Disbursement this Period 8364.53
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Events	Transaction ID : SB17.20206
Candidate Name Zeldin For Congress	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Rocklands Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 2418 Wisconsin Ave NW		Amount of Each Disbursement this Period 279.98
City Washington State DC Zip Code 20007	Purpose of Disbursement Food Catered for Fundraiser	Transaction ID : SB17.20244
Candidate Name Zeldin For Congress	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2015
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 168.00
City Dallas State TX Zip Code 75235	Purpose of Disbursement Airfare	Transaction ID : SB17.20190
Candidate Name Zeldin For Congress	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8812.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2015
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 256.00 <b>Transaction ID : SB17.20132</b>
City Dallas State TX Zip Code 75235	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2015
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 256.00 <b>Transaction ID : SB17.20199</b>
City Dallas State TX Zip Code 75235	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 90.10 <b>Transaction ID : SB17.20520</b>
City Dallas State TX Zip Code 75235	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	602.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 229			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Southwest Publishing &amp; Mailing Corp</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 4000 SE Adams St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.21023</b>
City Topeka	State KS	
Zip Code 66609	Purpose of Disbursement Printing and Mailshop	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Southwest Publishing &amp; Mailing Corp</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address 4000 SE Adams St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.21022</b>
City Topeka	State KS	
Zip Code 66609	Purpose of Disbursement Printing and Mailshop	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Square Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 1455 Market Street Ste 600		Amount of Each Disbursement this Period 158.86 <b>Transaction ID : SB17.19928</b>
City San Francisco	State CA	
Zip Code 94103	Purpose of Disbursement Credit Card Fees	Category/ Type 003
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1658.86
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Square Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2015
Mailing Address 1455 Market Street Ste 600		Amount of Each Disbursement this Period 1115.00 <b>Transaction ID : SB17.20538</b>
City San Francisco State CA Zip Code 94103	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Square Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 1455 Market Street Ste 600		Amount of Each Disbursement this Period 2057.40 <b>Transaction ID : SB17.21385</b>
City San Francisco State CA Zip Code 94103	Purpose of Disbursement Credit Card Fees 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 145.51 <b>Transaction ID : SB17.20176</b>
City Shirley State NY Zip Code 11967	Purpose of Disbursement Name Badges for Fundraiser 003 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3317.91
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2015
Mailing Address 999 Montauk Highway		Amount of Each Disbursement this Period 84.16 <b>Transaction ID : SB17.20534</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Storage R Us</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2015
Mailing Address 10 Frowein Rd		Amount of Each Disbursement this Period 252.00 <b>Transaction ID : SB17.21349</b>
City Center Moriches	State NY	
Zip Code 11934	Purpose of Disbursement Storage Unit Fee	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Storage R Us</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2015
Mailing Address 10 Frowein Rd		Amount of Each Disbursement this Period 84.00 <b>Transaction ID : SB17.20173</b>
City Center Moriches	State NY	
Zip Code 11934	Purpose of Disbursement Storage Unit Fee	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	420.16
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 215 OF 229		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Storage R Us</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 10 Frowein Rd		Amount of Each Disbursement this Period 84.00 <b>Transaction ID : SB17.20192</b>
City Center Moriches	State NY	
Purpose of Disbursement Storage Unit Fee	001	Candidate Name <b>Zeldin For Congress</b> Category/Type
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. Storage R Us</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 10 Frowein Rd		Amount of Each Disbursement this Period 84.00 <b>Transaction ID : SB17.20131</b>
City Center Moriches	State NY	
Purpose of Disbursement Monthly Storage Fee	001	Candidate Name <b>Zeldin For Congress</b> Category/Type
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Storage R Us</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2015
Mailing Address 10 Frowein Rd		Amount of Each Disbursement this Period 84.00 <b>Transaction ID : SB17.20528</b>
City Center Moriches	State NY	
Purpose of Disbursement Storage Unit Fee	001	Candidate Name <b>Zeldin For Congress</b> Category/Type
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	252.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 216 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Strategic Advance Service LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 611 Pennsylvania Ave SE #267		Amount of Each Disbursement this Period 10308.40 <b>Transaction ID : SB17.19926</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Security for Event 003 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. The Polling Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 1220 Connecticut Ave NW		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.20109</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Polling Consultant 005 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. The Polling Company</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2015
Mailing Address 1220 Connecticut Ave NW		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.20110</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Polling Consultant 005 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20308.40
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Trail Blazer Campaign Services</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2015
Mailing Address 620 Mendelssohn Ave N Ste 186		Amount of Each Disbursement this Period 6500.00 <b>Transaction ID : SB17.20229</b>
City Golden Valley State MN Zip Code 55427	Purpose of Disbursement Data Program 001 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Tri-State Envelope Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address Box 443		Amount of Each Disbursement this Period 483.83 <b>Transaction ID : SB17.21019</b>
City Beltsville State MD Zip Code 20704	Purpose of Disbursement Printing and Mail Shop 003 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Tri-State Envelope Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2015
Mailing Address Box 443		Amount of Each Disbursement this Period 459.52 <b>Transaction ID : SB17.21012</b>
City Beltsville State MD Zip Code 20704	Purpose of Disbursement Printing and Mailshop 003 Category/Type	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7443.35
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Uber Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 250 West 57th St		Amount of Each Disbursement this Period 9.86
City New York	State NY	
Zip Code 10013	Purpose of Disbursement 002	<b>Transaction ID : SB17.21332</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Uber Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address 250 West 57th St		Amount of Each Disbursement this Period 5.05
City New York	State NY	
Zip Code 10013	Purpose of Disbursement Taxi Fare 002	<b>Transaction ID : SB17.21333</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>c. Uber Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2015
Mailing Address 250 West 57th St		Amount of Each Disbursement this Period 12.48
City New York	State NY	
Zip Code 10013	Purpose of Disbursement Taxi Fare 002	<b>Transaction ID : SB17.21335</b>
Candidate Name <b>Zeldin For Congress</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 219 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address P.O. Box 06649		Amount of Each Disbursement this Period 328.00 <b>Transaction ID : SB17.20239</b>
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Airfare	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address P.O. Box 06649		Amount of Each Disbursement this Period 1176.20 <b>Transaction ID : SB17.20240</b>
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Airfare	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address P.O. Box 06649		Amount of Each Disbursement this Period 118.54 <b>Transaction ID : SB17.21390</b>
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Airfare	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1622.74
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 220 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2015
Mailing Address P.O. Box 06649		Amount of Each Disbursement this Period 25.47 <b>Transaction ID : SB17.20241</b>
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement Internet Charge for Flight	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. USA Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2015
Mailing Address 2815 Montauk Highway		Amount of Each Disbursement this Period 28.16 <b>Transaction ID : SB17.20170</b>
City Brookhaven	State NY	
Zip Code 11719	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. USA Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 2815 Montauk Highway		Amount of Each Disbursement this Period 41.12 <b>Transaction ID : SB17.20183</b>
City Brookhaven	State NY	
Zip Code 11719	Purpose of Disbursement Gas	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	94.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. USA Gas</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 2815 Montauk Highway		Amount of Each Disbursement this Period 32.13
City Brookhaven	State NY	
Purpose of Disbursement Gas	Category/ Type 002	
Candidate Name <b>Zeldin For Congress</b>		<b>Transaction ID : SB17.20518</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 105.29
City Phoenix	State AZ	
Purpose of Disbursement Airfare	Category/ Type 002	
Candidate Name <b>Zeldin For Congress</b>		<b>Transaction ID : SB17.21389</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2015
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 412.10
City Phoenix	State AZ	
Purpose of Disbursement Airfare	Category/ Type 002	
Candidate Name <b>Zeldin For Congress</b>		<b>Transaction ID : SB17.20135</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	549.52
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 222 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2015
Mailing Address 4000 East Sky Harbor Blvd		Amount of Each Disbursement this Period 412.10 <b>Transaction ID : SB17.20522</b>
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Airfare	Category/ Type 002
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 980.00 <b>Transaction ID : SB17.20200</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. US Postmaster</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.20128</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1882.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 223 OF 229	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 33.90 <b>Transaction ID : SB17.20210</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Overnight Packages	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 17.25 <b>Transaction ID : SB17.20533</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Overnight Package	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. US Postmaster</b>		Date of Disbursement MM / DD / YYYY 09 / 15 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 6.24 <b>Transaction ID : SB17.20209</b>
City Shirley	State NY	
Zip Code 11967	Purpose of Disbursement Overnight Package	Category/ Type 001
Candidate Name Zeldin For Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	57.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 17.25 <b>Transaction ID : SB17.21353</b>
City Shirley	State NY Zip Code 11967	
Purpose of Disbursement Overnight Package	Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 800 Montauk Highway		Amount of Each Disbursement this Period 33.90 <b>Transaction ID : SB17.21348</b>
City Shirley	State NY Zip Code 11967	
Purpose of Disbursement Overnight Packages	Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

Full Name (Last, First, Middle Initial) <b>c. Brittany Vallarella</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 120 Blydenburgh Ave		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.20536</b>
City Smithtown	State NY Zip Code 11787	
Purpose of Disbursement Paid Intern	Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	401.15
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 229			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2015
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 81.79 <b>Transaction ID : SB17.20143</b>
City Albany State NY Zip Code 12212	Purpose of Disbursement Balance Paid---Disconnected Line Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement MM / DD / YYYY 09 / 09 / 2015
Mailing Address P.O Box 15124		Amount of Each Disbursement this Period 215.00 <b>Transaction ID : SB17.20539</b>
City Albany State NY Zip Code 12212	Purpose of Disbursement Cell Phone Bill--Final Category/Type 001	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	296.79
<b>TOTAL</b> This Period (last page this line number only).....	196148.61

**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 226 OF 229	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. Sanford Perl</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address 570 Longwood Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB20A.21358</b>
City Glencoe	State IL	
Purpose of Disbursement Refund-Over Contributed		Category/ Type 010
Candidate Name <b>Zeldin For Congress</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 01	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
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:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

**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 227 OF 229	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 1325 MASSACHUSETTS AVE., NW		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB20C.21359</b>
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Refund-Overpayment of Contributions Category/Type 010	
Candidate Name <b>Zeldin For Congress</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 01		

Full Name (Last, First, Middle Initial) <b>B.</b>		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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	1500.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Zeldin For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Brabender Cox LLC</b>		Nature of Debt (Purpose): Digital Media
Mailing Address 1218 Grandview Avenue		
City	State	Zip Code
Pittsburgh	PA	15211

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.15329</b>	
<input type="text" value="7512.60"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7512.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HSP Direct</b>		Nature of Debt (Purpose): Estimate---Direct Mail
Mailing Address 13755 Sunrise Valley Dr Suite 450		
City	State	Zip Code
Herndon	VA	20171

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.15337</b>	
<input type="text" value="13026.16"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="13026.16"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>McLaughlin &amp; Associates Inc</b>		Nature of Debt (Purpose): Estimate--Survey/Interviews
Mailing Address 566 South Route 303		
City	State	Zip Code
Blauvelt	NY	10913

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.15323</b>	
<input type="text" value="9427.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="9427.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="20538.76"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Zeldin For Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Polling Company**

Mailing Address 1220 Connecticut Ave NW

City State Zip Code  
 Washington DC 20036

Nature of Debt (Purpose):  
 Polling Consultant

Outstanding Balance Beginning This Period **Transaction ID : SD10.15312**  
 5000.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
 0.00 5000.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	20538.76
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	20538.76