

REPORT OF RECEIPTS AND DISBURSEMENTS  
For an Authorized Committee  
(Summary Page)

RECEIVED

FEC MAIL ROOM

2000 JUL 14 P 1:10

|                        |           |
|------------------------|-----------|
| C00272211              | 113138328 |
| Pete King for Congress |           |
| Post Office Box 1428   |           |
| Seaford, NY 11783      | NY/3      |

2. FEC IDENTIFICATION NUMBER  
C00272211

3. IS THIS REPORT AN AMENDMENT?  
☒ YES ☐ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ Twelfth day report preceding \_\_\_\_\_  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- ☒ July 15 Quarterly Report ☐ Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_
- ☐ October 15 Quarterly Report ☐ Termination Report
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report
- activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

| 5. Covering Period                                     | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 04-01-00 through 06-30-00                              |                         |                                   |
| 6. Net Contributions (other than loans)                |                         |                                   |
| (a) Total Contributions (from Line 11(e))              | \$81,349.92             | \$140,818.92                      |
| (b) Total Contribution Refunds (from Line 20(d))       | \$1,000.00              | \$1,000.00                        |
| (c) Net Contributions (Line 6(b) from Line 6(a))       | \$80,349.92             | \$139,818.92                      |
| 7. Net Operating Expenditures                          |                         |                                   |
| (a) Total Operating Expenditures (from Line 17)        | \$27,500.45             | \$56,591.73                       |
| (b) Total Offsets to Operating Expenditures (from 14)  |                         |                                   |
| (c) Net Operating Expenditures (Line 7(a) - Line 7(b)) | \$27,500.45             | \$56,591.73                       |
| 8. Cash on Hand at Close of Reporting Period (Line 27) | \$613,274.10            |                                   |
| 9. Debts and Obligations Owed TO the Committee         |                         |                                   |
| 10. Debts and Obligations Owed BY the Committee        |                         |                                   |

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

I certify that I have examined this report and it is correct and complete.

Type or Print Name of Treasurer  
Anne Rosenfeld

Signature of Treasurer

Date

7/11/00

NOTE: Submission of false, erroneous, or incomplete information may subject signer to penalties.

FEC FORM 3

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements**

| <b>Pete King for Congress</b>  |  | <b>C00272211</b>                | <b>from 04-01-00 to 06-30-00</b> |
|--|--|---------------------------------|----------------------------------|
| <b>I. RECEIPTS</b>   |  | <b>COLUMN A<br/>This Period</b> | <b>COLUMN B<br/>Year-To-Date</b> |
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>                          |  |                                 |                                  |
| (a) Individuals/Persons Other Than Political Committees                    |  |                                 |                                  |
| (i) Itemized (Use Schedule A) . . . . .                                    |  | <b>\$39,450.00</b>              |                                  |
| (ii) Unitemized . . . . .  |  | <b>\$9,399.92</b>               |                                  |
| (iii) Total of contributions from individuals . . . . .                    |  | <b>\$48,849.92</b>              | <b>\$88,818.92</b>               |
| (b) Political Party Committees . . . . .                                   |  |                                 |                                  |
| (c) Other Political Committees (such as PACs) . . . . .                    |  | <b>\$32,500.00</b>              | <b>\$52,000.00</b>               |
| (d) The Candidate . . . . .  |  |                                 |                                  |
| (e) TOTAL CONTRIBUTIONS (11(a)(iii)+(b)+(c)+(d)) . . . . .                 |  | <b>\$81,349.92</b>              | <b>\$140,818.92</b>              |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>                      |  |                                 |                                  |
| <b>13. LOANS:</b>  |  |                                 |                                  |
| (a) Made or Guaranteed by the Candidate . . . . .                          |  |                                 |                                  |
| (b) All Other Loans . . . . .  |  |                                 |                                  |
| (c) TOTAL LOANS (add 13(a) and (b)) . . . . .                              |  |                                 |                                  |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (refunds, etc.)</b>               |  |                                 |                                  |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> . . . . .            |  |                                 | <b>\$1,508.97</b>                |
| <b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> . . . . .      |  | <b>\$81,349.92</b>              | <b>\$142,327.89</b>              |
| <b>II. DISBURSEMENTS</b>   |  |                                 |                                  |
| <b>17. OPERATING EXPENDITURES</b> . . . . .                                |  | <b>\$27,500.45</b>              | <b>\$56,591.73</b>               |
| <b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b> . . . . .              |  |                                 |                                  |
| <b>19. LOAN REPAYMENTS:</b>  |  |                                 |                                  |
| (a) Of Loans Made or Guaranteed by the Candidate . . . . .                 |  |                                 |                                  |
| (b) Of All Other Loans . . . . .   |  |                                 |                                  |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) . . . . .                    |  |                                 |                                  |
| <b>20. REFUNDS OF CONTRIBUTIONS TO:</b>                                    |  |                                 |                                  |
| (a) Individuals, Persons Other than Political Committees . . . . .         |  | <b>\$1,000.00</b>               | <b>\$1,000.00</b>                |
| (b) Political Party Committees . . . . .                                   |  |                                 |                                  |
| (c) Other Political Committees (such as PACs) . . . . .                    |  |                                 |                                  |
| (d) TOTAL CONTRIBUTION REFUNDS (20(a) + (b) + (c)) . . . . .               |  | <b>\$1,000.00</b>               | <b>\$1,000.00</b>                |
| <b>21. OTHER DISBURSEMENTS</b> . . . . .                                   |  |                                 | <b>\$1,000.00</b>                |
| <b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b> . . . . . |  | <b>\$28,500.45</b>              | <b>\$58,591.73</b>               |
| <b>III. CASH SUMMARY</b>   |  |                                 |                                  |
| <b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>                   |  |                                 | <b>\$560,424.63</b>              |
| <b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>                       |  |                                 | <b>\$81,349.92</b>               |
| <b>25. SUBTOTAL (add Line 23 and Line 24)</b>                              |  |                                 | <b>\$641,774.55</b>              |
| <b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>                  |  |                                 | <b>\$28,500.45</b>               |
| <b>27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Line 25 - Line 26)</b>   |  |                                 | <b>\$613,274.10</b>              |

## SCHEDULE A

## ITEMIZED RECEIPTS

## Contributions from Individuals/Persons

|                          |       |
|--------------------------|-------|
| PAGE 1                   | OF 11 |
| FOR LINE NUMBER 11(a)(i) |       |

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NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|  |   |                                  |                                      |
|--|---|----------------------------------|--------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br><b>James McLaughlin</b><br><b>Post Office Box 5496</b><br><b>Hanover, NH 03755</b>           | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Partner</b>                                  | Year-to-Date > <b>\$1,000.00</b> |                                      |
| B. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Partner</b>                                  | Year-to-Date > <b>\$2,000.00</b> |                                      |
| C. Full Name, Mailing Address and ZIP Code<br><b>James C. McLaughlin</b><br><b>461 Muttontown Road</b><br><b>Muttontown, NY 11791-8652</b> | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Chairman</b>                                 | Year-to-Date > <b>\$1,000.00</b> |                                      |
| D. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Chairman</b>                                 | Year-to-Date > <b>\$2,000.00</b> |                                      |
| E. Full Name, Mailing Address and ZIP Code<br><b>Mark McLaughlin</b><br><b>22 Glenn Crescent</b><br><b>Centerport, NY 11721</b>            | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$500.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Head Trader</b>                              | Year-to-Date > <b>\$500.00</b>   |                                      |
| F. Full Name, Mailing Address and ZIP Code<br><b>Steve Ircha</b><br><b>155 East 29th Street, Apt. 26H</b><br><b>New York, NY 10016</b>     | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$500.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>Managing Direct</b>                          | Year-to-Date > <b>\$500.00</b>   |                                      |
| G. Full Name, Mailing Address and ZIP Code<br><b>Allan Vogel</b><br><b>3 Liberty Bell Court</b><br><b>East Brunswick, NJ 08816</b>         | Name of Employer<br><b>McLaughlin,</b><br><b>Piven, Vogel</b> | Date<br><b>04-18-00</b>          | Amount this pd.<br><b>\$500.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | Occupation<br><b>President</b>                                | Year-to-Date > <b>\$500.00</b>   |                                      |
| SUBTOTAL of Receipts This Page (optional) >  |   |                                  | <b>\$5,500.00</b>                    |
| TOTAL This Period (last page this line number only) >  |   |                                  | <b>-----</b>                         |

**SCHEDULE A**                      **ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons**

**PAGE 2**   **OF 11**  
**FOR LINE NUMBER**  
**11(a)(i)**

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**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**

**C00272211**

|   |   |                                |  |
|---|---|--------------------------------|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Ed Connelly</b><br><b>93 Evans Avenue</b><br><b>Oceanside, NY 11572</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Name of Employer</b><br><b>CWA</b><br><b>1104</b>        | <b>Date</b><br><b>04-18-00</b> | <b>Amount this pd.</b><br><b>\$250.00</b>                        |
|   | <b>Occupation</b><br><b>Secretary/Treasurer</b>             | <b>04-18-00</b>                | <b>\$250.00</b>  |
|   | <b>Year-to-Date &gt;</b> <b>\$500.00</b>                    |                                |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Milan Jadlicka</b><br><b>325 North Virginia Avenue</b><br><b>North Massapequa, NY 11758</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>BEA Trading Corp.</b>         | <b>Date</b><br><b>04-18-00</b> | <b>Amount this pd.</b><br><b>\$500.00</b>                        |
|   | <b>Occupation</b><br><b>Merchant</b>                        |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$500.00</b>                    |                                |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Donald Kaough</b><br><b>200 Galleria Parkway, Suite 970</b><br><b>Atlanta, GA 30339</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>Retired</b>                   | <b>Date</b><br><b>04-14-00</b> | <b>Amount this pd.</b><br><b>\$1,000.00</b><br><b>FUNDRAISED</b> |
|   | <b>Occupation</b><br><b>Retired</b>                         |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$1,000.00</b>                  |                                |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Thomas Downey</b><br><b>1225 1 Street, NW, Suite 350</b><br><b>Washington, DC 20005</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>Downey McGrath Group, Inc</b> | <b>Date</b><br><b>04-14-00</b> | <b>Amount this pd.</b><br><b>\$500.00</b>                        |
|   | <b>Occupation</b><br><b>Chairman</b>                        |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$500.00</b>                    |                                |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>David Knott</b><br><b>485 Underhill Blvd, Suite 205</b><br><b>Syosset, NY 11791</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><b>Knott Partners, LP</b>        | <b>Date</b><br><b>04-14-00</b> | <b>Amount this pd.</b><br><b>\$1,000.00</b><br><b>FUNDRAISED</b> |
|   | <b>Occupation</b><br><b>General Partner</b>                 |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$1,000.00</b>                  |                                |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>F. Peter Herzberg</b><br><b>54 Mineola Avenue</b><br><b>St. Lookout, NY 11569</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br><b>Self-Employed</b>             | <b>Date</b><br><b>04-14-00</b> | <b>Amount this pd.</b><br><b>\$250.00</b><br><b>FUNDRAISED</b>   |
|   | <b>Occupation</b><br><b>Physician</b>                       |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$250.00</b>                    |                                |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Robert J. Bond</b><br><b>10000 10th Avenue</b><br><b>St. Lookout, NY 11569</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Name of Employer</b><br><b>Bond &amp; Co. Inc.</b>       | <b>Date</b><br><b>04-14-00</b> | <b>Amount this pd.</b><br><b>\$500.00</b>                        |
|   | <b>Occupation</b><br><b>Consultant</b>                      |                                |  |
|   | <b>Year-to-Date &gt;</b> <b>\$500.00</b>                    |                                |  |

**Page (optional)**                      **>**      **\$4,250.00**

**Page this line number only)**                      **>**      **-----**

**SCHEDULE A**                      **ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons**

**PAGE 3 OF 11**  
**FOR LINE NUMBER 11(a)(1)**

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**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**

**C00272211**

|  |  |  |  |                         |   |
|--|--|--|--|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code<br><b>Joseph Cassidy</b><br><b>24 Pell Terrace</b><br><b>Garden City, NY 11530</b>            |  | Name of Employer<br><b>Brotherhood of Locomotive</b> |  | Date<br><b>05-30-00</b> | Amount this pd.<br><br><b>\$250.00</b><br><b>FUNDRAISED</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>International VP</b>                |  |                         |   |
| Year-to-Date > <b>\$250.00</b>   |  |  |  |                         |   |
| B. Full Name, Mailing Address and ZIP Code<br><b>Gerald McMurray</b><br><b>7714 Ridgecrest Drive</b><br><b>Alexandria, VA 22308-1051</b> |  | Name of Employer<br><b>Fannine Mae</b>               |  | Date<br><b>05-30-00</b> | Amount this pd.<br><br><b>\$500.00</b>                      |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>Vice President</b>                  |  |                         |   |
| Year-to-Date > <b>\$500.00</b>   |  |  |  |                         |   |
| C. Full Name, Mailing Address and ZIP Code<br><b>Robert Lijla</b><br><b>1 Florgate Road</b><br><b>Farmingdale, NY 11735</b>              |  | Name of Employer<br><b>CWA</b><br><b>1104</b>        |  | Date<br><b>05-10-00</b> | Amount this pd.<br><br><b>\$250.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>President</b>                       |  |                         |   |
| Year-to-Date > <b>\$250.00</b>   |  |  |  |                         |   |
| D. Full Name, Mailing Address and ZIP Code<br><b>Thomas Judge</b><br><b>584 Hawthorne Street</b><br><b>North Massapequa, NY 11758</b>    |  | Name of Employer<br><b>Information Requested</b>     |  | Date<br><b>05-10-00</b> | Amount this pd.<br><br><b>\$500.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>Info Requested</b>                  |  |                         |   |
| Year-to-Date > <b>\$1,000.00</b>   |  |  |  |                         |   |
| E. Full Name, Mailing Address and ZIP Code<br><b>James Smith</b><br><b>5214 Farrington Road</b><br><b>Bethesda, MD 20816-2920</b>        |  | Name of Employer<br><b>Smith-Free Group</b>          |  | Date<br><b>06-13-00</b> | Amount this pd.<br><br><b>\$1,000.00</b>                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>Chairman</b>                        |  |                         |   |
| Year-to-Date > <b>\$1,000.00</b>   |  |  |  |                         |   |
| F. Full Name, Mailing Address and ZIP Code<br><b>Ellen Murray</b><br><b>114 Cedarhurst Avenue</b><br><b>Point Lookout, NY 11560</b>      |  | Name of Employer<br><b>Retired</b>                   |  | Date<br><b>06-13-00</b> | Amount this pd.<br><br><b>\$50.00</b>                       |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>Retired</b>                         |  |                         |   |
| Year-to-Date > <b>\$300.00</b>   |  |  |  |                         |   |
| G. Full Name, Mailing Address and ZIP Code<br><b>Kenneth Langone</b><br><b>375 Park Avenue, Suite 2205</b><br><b>New York, NY 10152</b>  |  | Name of Employer<br><b>Invemed Associates, Inc.</b>  |  | Date<br><b>06-20-00</b> | Amount this pd.<br><br><b>\$1,000.00</b>                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   |  | Occupation<br><b>President &amp; CEO</b>             |  |                         |   |
| Year-to-Date > <b>\$1,000.00</b>   |  |  |  |                         |   |

**SUBTOTAL of Receipts This Page (optional)** ..... >                      **\$3,550.00**

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

## SCHEDULE A

## ITEMIZED RECEIPTS

PAGE 4 OF 11

## Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

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NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

|  |  |                                  |                                      |
|--|--|----------------------------------|--------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br><b>Kenneth Langone</b><br>375 Park Avenue, Suite 2205<br>New York, NY 10152              | Name of Employer<br><b>Invenmad Associates, Inc.</b> | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>President &amp; CEO</b>             | Year-to-Date > <b>\$2,000.00</b> |                                      |
| B. Full Name, Mailing Address and ZIP Code<br><b>Gina Holzman</b><br>1161 Virginia Road<br>San Marino, CA 91108                        | Name of Employer<br><b>Homemaker</b>                 | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Homemaker</b>                       | Year-to-Date > <b>\$1,000.00</b> |                                      |
| C. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>Homemaker</b>                 | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Homemaker</b>                       | Year-to-Date > <b>\$2,000.00</b> |                                      |
| D. Full Name, Mailing Address and ZIP Code<br><b>Steven Holzman</b><br>1161 Virginia Road<br>San Marino, CA 91108                      | Name of Employer<br><b>Self-Employed</b>             | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Money Manager</b>                   | Year-to-Date > <b>\$1,000.00</b> |                                      |
| E. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>Self-Employed</b>             | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Money Manager</b>                   | Year-to-Date > <b>\$2,000.00</b> |                                      |
| F. Full Name, Mailing Address and ZIP Code<br><b>Robin Rosenzweig</b><br>237 Woodfuff Avenue<br>Los Angeles, CA 90024                  | Name of Employer<br><b>Homemaker</b>                 | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Homemaker</b>                       | Year-to-Date > <b>\$1,000.00</b> |                                      |
| G. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>Homemaker</b>                 | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Homemaker</b>                       | Year-to-Date > <b>\$2,000.00</b> |                                      |
| SUBTOTAL of Receipts This Page (optional) >  | <b>\$7,000.00</b>                                    |                                  |                                      |
| TOTAL This Period (last page this line number only) >  | -----  |                                  |                                      |

## SCHEDULE A

## ITEMIZED RECEIPTS

PAGE 5 OF 11

## Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(1)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

|  |   |                                  |                                      |
|--|---|----------------------------------|--------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br><b>Daria Moore</b><br>777 Main Street, Suite 2700<br>Fort Worth, TX 76102                | Name of Employer<br><b>Rainwater, Inc.</b>          | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>President</b>                      | Year-to-Date > <b>\$1,000.00</b> |                                      |
| B. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>Rainwater, Inc.</b>          | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>President</b>                      | Year-to-Date > <b>\$2,000.00</b> |                                      |
| C. Full Name, Mailing Address and ZIP Code<br><b>Gilda Ventresca Ecroyd</b><br>4 Morris Place<br>North Caldwell, NJ 07006              | Name of Employer<br><b>NYU School of Medicine</b>   | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Asst. Dean for Government</b>      | Year-to-Date > <b>\$1,000.00</b> |                                      |
| D. Full Name, Mailing Address and ZIP Code<br><b>Silas Riedel</b><br>89 Redwood Lane<br>Massapequa Park, NY 11762                      | Name of Employer<br><b>Nassau Police Department</b> | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$250.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Police Officer</b>                 | Year-to-Date > <b>\$250.00</b>   |                                      |
| E. Full Name, Mailing Address and ZIP Code<br><b>Jack Rosenthal</b><br>117 East 29th Street<br>New York, NY 10016-8001                 | Name of Employer<br><b>J.R. Equities, Inc.</b>      | Date<br><b>06-20-00</b>          | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>President</b>                      | Year-to-Date > <b>\$1,000.00</b> |                                      |
| F. Full Name, Mailing Address and ZIP Code<br><b>Joseph Smith</b><br>123 East 83rd Street, Apt. 1B<br>New York, NY 10028               | Name of Employer<br><b>Self-employed</b>            | Date<br><b>06-23-00</b>          | Amount this pd.<br><b>\$500.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Restaurateur</b>                   | Year-to-Date > <b>\$500.00</b>   |                                      |
| G. Full Name, Mailing Address and ZIP Code<br><b>Thomas Mangan</b><br>133 Sackett Street<br>Brooklyn, NY 11231                         | Name of Employer<br><b>Retired</b>                  | Date<br><b>06-23-00</b>          | Amount this pd.<br><b>\$300.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br><b>Retired</b>                        | Year-to-Date > <b>\$300.00</b>   |                                      |
| SUBTOTAL of Receipts This Page (optional) >  | <b>\$5,050.00</b>                                   |                                  |                                      |
| TOTAL This Period (last page this line number only) >  | -----   |                                  |                                      |

## SCHEDULE A

## ITEMIZED RECEIPTS

PAGE 6 OF 11

## Contributions from Individuals/Persons

FOR LINE NUMBER  
11(a)(i)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

|  |   |                         |                                      |
|--|---|-------------------------|--------------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br><b>Frank Durkan</b><br><b>52 Duane Street</b><br><b>New York, NY 1007</b>                      | Name of Employer<br><b>Self-Employed</b>        | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$250.00</b>   |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Attorney</b>                   |                         |                                      |
|  | Year-to-Date >                                  | <b>\$250.00</b>         |                                      |
| B. Full Name, Mailing Address and ZIP Code<br><b>Paulinus Bryce</b><br><b>1041 Taylor Lane</b><br><b>Mamaroneck, NY 10543</b>                | Name of Employer<br><b>Retired</b>              | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$300.00</b>   |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Retired</b>                    |                         |                                      |
|  | Year-to-Date >                                  | <b>\$300.00</b>         |                                      |
| C. Full Name, Mailing Address and ZIP Code<br><b>Francis O'Connor</b><br><b>6 Weir Lane</b><br><b>Locust Valley, NY 11560</b>                | Name of Employer<br><b>O'Connor Engineering</b> | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$300.00</b>   |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Engineer</b>                   |                         |                                      |
|  | Year-to-Date >                                  | <b>\$300.00</b>         |                                      |
| D. Full Name, Mailing Address and ZIP Code<br><b>James Duffy</b><br><b>49-02 68th Street</b><br><b>Woodside, NY 11377</b>                    | Name of Employer<br><b>Pyramid Associates</b>   | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$450.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Owner</b>                      |                         |                                      |
|  | Year-to-Date >                                  | <b>\$450.00</b>         |                                      |
| E. Full Name, Mailing Address and ZIP Code<br><b>Olive Graham</b><br><b>151 East Palisade Avenue, Apt. E-5</b><br><b>Englewood, NJ 07631</b> | Name of Employer<br><b>Euro-Tech</b>            | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Bookkeeper</b>                 |                         |                                      |
|  | Year-to-Date >                                  | <b>\$1,000.00</b>       |                                      |
| F. Full Name, Mailing Address and ZIP Code<br><b>(same as above)</b>   | Name of Employer<br><b>Euro-Tech</b>            | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$1,000.00</b> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Bookkeeper</b>                 |                         |                                      |
|  | Year-to-Date >                                  | <b>\$2,000.00</b>       |                                      |
| G. Full Name, Mailing Address and ZIP Code<br><b>John Kelly</b><br><b>3241 Sunrise Lake</b><br><b>Milford, PA 18337</b>                      | Name of Employer<br><b>Preferred Mechanical</b> | Date<br><b>06-23-00</b> | Amount this pd.<br><b>\$300.00</b>   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | Occupation<br><b>Plumbing Contractor</b>        |                         |                                      |
|  | Year-to-Date >                                  | <b>\$300.00</b>         |                                      |
| SUBTOTAL of Receipts This Page (optional) >  | <b>\$3,600.00</b>                               |                         |                                      |
| TOTAL This Period (last page this line number only) >  | -----   |                         |                                      |



**SCHEDULE A**                      **ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons**

|                        |              |
|------------------------|--------------|
| <b>PAGE 7</b>          | <b>OF 11</b> |
| <b>FOR LINE NUMBER</b> |              |
| <b>11(a)(i)</b>        |              |

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**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**                      **C00272211**

|   |  |                                  |  |
|---|--|----------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code<br><b>Siobhan Hennessy</b><br><b>829 Avenue of the Americas, #2</b><br><b>New York, NY 10001</b> | Name of Employer<br><b>Gaffco</b>  | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$300.00</b>   |
|   | Occupation<br><b>Sales Rep.</b>  |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$300.00</b>   |  |
| B. Full Name, Mailing Address and ZIP Code<br><b>Sean Mackin</b><br><b>32 Scarsdale Avenue</b><br><b>Scarsdale, NY 10583</b>                | Name of Employer<br><b>Preferred Mechanical</b>  | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$1,000.00</b> |
|   | Occupation<br><b>Plumber</b>   |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$1,000.00</b> |  |
| C. Full Name, Mailing Address and ZIP Code<br><b>Dan Papachristos</b><br><b>16 Sherwood Road</b><br><b>Ridgefield, Ct 06877</b>             | Name of Employer<br><b>Ranger Plumbing Supply</b>  | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$300.00</b>   |
|   | Occupation<br><b>Plumber supplier</b>  |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$300.00</b>   |  |
| D. Full Name, Mailing Address and ZIP Code<br><b>James Alger</b><br><b>25 Highland Blvd.</b><br><b>Lynbrook, NY 11563</b>                   | Name of Employer<br><b>IBS</b>   | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$500.00</b>   |
|   | Occupation<br><b>Telecommunications</b>  |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$500.00</b>   |  |
| E. Full Name, Mailing Address and ZIP Code<br><b>Jerry Forrest</b><br><b>33 Iroquois Drive</b><br><b>Parlin, NJ 08859</b>                   | Name of Employer<br><b>IBS, Inc.</b>   | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$500.00</b>   |
|   | Occupation<br><b>Telecommunications Special</b>  |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$500.00</b>   |  |
| F. Full Name, Mailing Address and ZIP Code<br><b>Thomas Dillon</b><br><b>55 New Street</b><br><b>Ramsey, NJ 07446-1850</b>                  | Name of Employer<br><b>Gilroy, Downes, Horowitz</b>  | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$300.00</b>   |
|   | Occupation<br><b>Attorney</b>  |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$300.00</b>   |  |
| G. Full Name, Mailing Address and ZIP Code<br><b>Carol O'Connor</b><br><b>209 Renison Drive</b><br><b>Westbury, NY 11590</b>                | Name of Employer<br><b>Nassau County Board of As</b>   | Date<br><b>06-23-00</b>          | Amount this pd.<br><br><b>\$300.00</b>   |
|   | Occupation<br><b>Deputy Director</b>   |                                  |  |
|   | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Year-to-Date > <b>\$300.00</b>   |  |
| SUBTOTAL of Receipts This Page (optional) >   |  |                                  | <b>\$3,200.00</b>                        |
| TOTAL This Period (last page this line number only) >   |  |                                  | <b>-----</b>                             |

**SCHEDULE A**                      **ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons**

|                                 |              |
|---------------------------------|--------------|
| <b>PAGE 8</b>                   | <b>OF 11</b> |
| <b>FOR LINE NUMBER 11(a)(i)</b> |              |

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|   |                  |
|---|------------------|
| <b>NAME OF COMMITTEE (in Full)</b><br><b>Pete King for Congress</b> | <b>C00272211</b> |
|---|------------------|

|  |  |                                |   |
|--|--|--------------------------------|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Lawrence Mahon</b><br><b>7 Schoolhouse Lane</b><br><b>Syosset, NY 11791</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><b>Mahon, Mahon &amp; Mahon</b><br><b>Occupation</b><br><b>Attorney</b><br><b>Year-to-Date &gt;</b> <b>\$600.00</b> | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$600.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Gerard Keogh</b><br><b>24 Fuller Place</b><br><b>Brooklyn, NY 11215</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Name of Employer</b><br><b>Self-Employed</b><br><b>Occupation</b><br><b>Attorney</b><br><b>Year-to-Date &gt;</b> <b>\$300.00</b>            | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$300.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Ellen VanZandt</b><br><b>179 Hillside Avenue</b><br><b>Englewood, NJ 07631</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>Continental-Anchor LTD.</b><br><b>Occupation</b><br><b>Executive</b><br><b>Year-to-Date &gt;</b> <b>\$300.00</b> | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$300.00</b> |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Mary Ellen Raftery</b><br><b>493 Bayview Avenue</b><br><b>Cedarhurst, NY 11516</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Retired</b><br><b>Occupation</b><br><b>Retired</b><br><b>Year-to-Date &gt;</b> <b>\$300.00</b>                   | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$300.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Torin McGowan</b><br><b>116 Smithtown Blvd.</b><br><b>Nesconset, NY 11757</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br><b>Preferred Sprinkler</b><br><b>Occupation</b><br><b>Contractor</b><br><b>Year-to-Date &gt;</b> <b>\$300.00</b>    | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$300.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Arthur Richard Thomson</b><br><b>1045 Park Avenue</b><br><b>New York, NY 10028</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Retired</b><br><b>Occupation</b><br><b>Retired</b><br><b>Year-to-Date &gt;</b> <b>\$300.00</b>                   | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$300.00</b> |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Seans Downs</b><br><b>15 Park Row</b><br><b>New York, NY 10038</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Name of Employer</b><br><b>Self</b><br><b>Occupation</b><br><b>Attorney</b><br><b>Year-to-Date &gt;</b> <b>\$500.00</b>                     | <b>Date</b><br><b>06-23-00</b> | <b>Amount this pd.</b><br><b>\$500.00</b> |
| <b>SUBTOTAL of Receipts This Page (optional) &gt;</b>  |  |                                | <b>\$2,600.00</b>                         |
| <b>TOTAL This Period (last page this line number only) &gt;</b>  |  |                                | <b>-----</b>                              |

## SCHEDULE A

## ITEMIZED RECEIPTS

## Contributions from Individuals/Persons

PAGE 9 OF 11

FOR LINE NUMBER  
11(a)(i)

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NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|   |   |                     |  |
|---|---|---------------------|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Anthony Pearl</b><br><b>8 Elm Drive</b><br><b>New Hyde Park, NY 11040</b>                     | <b>Name of Employer</b><br><b>Self-Employed</b>                 | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>Attorney</b>                            | <b>06-23-00</b>     | <b>\$300.00</b>  |
|   | <b>Year-to-Date &gt;</b>  | <b>\$300.00</b>     |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Theresa Bischoff</b><br><b>415 East 37th, Apt. 42C</b><br><b>New York, NY 10016-3249</b>      | <b>Name of Employer</b><br><b>NYU Hospital Center</b>           | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>President</b>                           | <b>06-28-00</b>     | <b>\$1,000.00</b>  |
|   | <b>Year-to-Date &gt;</b>  | <b>\$1,000.00</b>   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Linda Robinson</b><br><b>75 Rockefeller Plaza, 8th Floor</b><br><b>New York, NY 10019</b>     | <b>Name of Employer</b><br><b>Robinson, Lerer &amp; Montgom</b> | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>President &amp; CEO</b>                 | <b>06-28-00</b>     | <b>\$1,000.00</b>  |
|   | <b>Year-to-Date &gt;</b>  | <b>\$1,000.00</b>   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Henry R. Silverman</b><br><b>9 West 57th Street, 37th Floor</b><br><b>New York, NY 10019</b>  | <b>Name of Employer</b><br><b>Cendant Corporation</b>           | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>CEO, Chairman &amp; Presiden</b>        | <b>06-30-00</b>     | <b>\$1,000.00</b>  |
|   | <b>Year-to-Date &gt;</b>  | <b>\$1,000.00</b>   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Gilroy Downes Horowitz &amp; Goldstein</b><br><b>15 Park Row</b><br><b>New York, NY 10038</b> | <b>Name of Employer</b><br><br>                                 | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><br>                                       | <b>06-23-00</b>     | <b>\$600.00</b><br><b>PARTNERSHIP</b><br><b>ATTRIBUTED</b><br><b>SEE BELOW</b> |
|   | <b>Year-to-Date &gt;</b>  | <b>\$600.00</b>     |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Michael Horowitz</b><br><b>15 Park Row</b><br><b>New York, NY 10038</b>                       | <b>Name of Employer</b><br><b>Gilroy, Downes, Horowitz</b>      | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>Attorney</b>                            | <b>06-23-00</b>     | <b>\$150.00</b><br><b>ATTRIBUTION</b><br><b>MEMO</b>                           |
|   | <b>Year-to-Date &gt;</b>  | <b>\$150.00</b>     |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Michael Goldstein</b><br><b>15 Park Row</b><br><b>New York, NY 10038</b>                      | <b>Name of Employer</b><br><b>Gilroy, Downes, Horowitz</b>      | <b>Date</b><br><br> | <b>Amount this pd.</b><br><br>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b><br><b>Attorney</b>                            | <b>06-23-00</b>     | <b>\$150.00</b><br><b>ATTRIBUTION</b><br><b>MEMO</b>                           |
|   | <b>Year-to-Date &gt;</b>  | <b>\$150.00</b>     |  |
| <b>SUBTOTAL of Receipts This Page (optional) &gt;</b>   |   |                     | <b>\$3,900.00</b>  |
| <b>TOTAL This Period (last page this line number only) &gt;</b>   |   |                     | <b>-----</b>   |

## SCHEDULE A

## ITEMIZED RECEIPTS

## Contributions from Individuals/Persons

|                          |       |
|--------------------------|-------|
| PAGE 10                  | OF 11 |
| FOR LINE NUMBER 11(a)(i) |       |

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|  |   |                         |   |
|--|---|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code<br>Jim Gilroy<br>15 Park Row<br>New York, NY 10038  | Name of Employer<br>Gilroy, Downes,<br>Horowitz | Date<br>06-23-00        | Amount this pd.<br>\$150.00<br>ATTRIBUTION<br>MEMO                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney                          | Year-to-Date > \$150.00 |   |
| B. Full Name, Mailing Address and ZIP Code<br>Larry Downes<br>15 Park Row<br>New York, NY 10038  | Name of Employer<br>Gilroy, Downes,<br>Horowitz | Date<br>06-23-00        | Amount this pd.<br>\$150.00<br>ATTRIBUTION<br>MEMO                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney                          | Year-to-Date > \$150.00 |   |
| C. Full Name, Mailing Address and ZIP Code<br>Morici & Morici LLP<br>1001 Franklin Avenue<br>Garden City, NY 11530                     | Name of Employer                                | Date<br>06-28-00        | Amount this pd.<br>\$300.00<br>PARTNERSHIP<br>ATTRIBUTED<br>SEE BELOW |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation                                      | Year-to-Date > \$300.00 |   |
| D. Full Name, Mailing Address and ZIP Code<br>Michael D Morici<br>1001 Franklin Avenue<br>Garden City, NY 11530                        | Name of Employer<br>Self                        | Date<br>06-28-00        | Amount this pd.<br>\$150.00<br>ATTRIBUTION<br>MEMO                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney                          | Year-to-Date > \$150.00 |   |
| E. Full Name, Mailing Address and ZIP Code<br>Robert Morici<br>1001 Franklin Avenue<br>Garden City, NY 11530                           | Name of Employer<br>Self                        | Date<br>06-28-00        | Amount this pd.<br>\$150.00<br>ATTRIBUTION<br>MEMO                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney                          | Year-to-Date > \$150.00 |   |
| F. Full Name, Mailing Address and ZIP Code<br>Martine & Gallagher McMahon<br>90 Broad Street<br>New York, NY 10004                     | Name of Employer                                | Date<br>06-23-00        | Amount this pd.<br>\$500.00<br>PARTNERSHIP<br>ATTRIBUTED<br>SEE BELOW |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation                                      | Year-to-Date > \$500.00 |   |
| G. Full Name, Mailing Address and ZIP Code<br>Louis Martine<br>90 Broad Street<br>New York, NY 10004                                   | Name of Employer<br>Self                        | Date<br>06-23-00        | Amount this pd.<br>\$250.00<br>ATTRIBUTION<br>MEMO                    |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney                          | Year-to-Date > \$250.00 |   |

SUBTOTAL of Receipts This Page (optional) >

\$800.00

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

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**SCHEDULE A**                      **ITEMIZED RECEIPTS**  
**Contributions from Individuals/Persons**

**PAGE 11** | **OF 11**  
**FOR LINE NUMBER**  
**11(a)(i)**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**

**C00272211**

|  |  |  |  |
|--|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>William Gallagher</b><br><b>90 Broad Street</b><br><b>New York, NY 10004</b> | <b>Name of Employer</b><br><b>Self</b>   | <b>Date</b><br><b>06-23-00</b>           | <b>Amount this pd.</b><br><br><b>\$250.00</b><br><b>ATtribution</b><br><b>MEMO</b> |
|  | <b>Occupation</b><br><b>Attorney</b>   |  |  |
|  | <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Year-to-Date &gt;</b> <b>\$250.00</b> |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b>  | <b>Date</b>                              | <b>Amount this pd.</b>   |
|  | <b>Occupation</b>  |  |  |
|  | <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Year-to-Date &gt;</b>                 |  |

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

**- 0 -**

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

**\$39,450.00**

## SCHEDULE A

## ITEMIZED RECEIPTS

PAGE 1 OF 4

## Contributions from Other Political Committees

FOR LINE NUMBER  
11(c)

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

|   |  |  |   |
|---|--|--|---|
| A. Full Name, Mailing Address and ZIP Code<br><b>Metropolitan Life Insurance Company Employee Political Participation Fund A</b><br>One Madison Avenue<br>New York, NY 10010-3690 | Name of Employer<br><b>Metropolitan Life Insurance Company Employee Political Participation Fund A</b><br>Occupation | Date<br><b>04-14-00</b>                    | Amount this pd.<br><b>\$1,000.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$1,000.00</b>   |  |   |
| B. Full Name, Mailing Address and ZIP Code<br><b>Sheet Metal Workers International Association PAL</b><br>1750 New York Avenue NW<br>Washington, DC 20006                         | Name of Employer<br><b>PAL</b><br>Occupation   | Date<br><b>04-14-00</b>                    | Amount this pd.<br><b>\$500.00</b>                        |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$500.00</b>   |  |   |
| C. Full Name, Mailing Address and ZIP Code<br><b>Boeing PAC</b><br>1200 Wilson Blvd.<br>Arlington, VA 22209   | Name of Employer<br><b>Boeing PAC</b><br>Occupation  | Date<br><b>05-30-00</b>                    | Amount this pd.<br><b>\$500.00</b>                        |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$500.00</b>   |  |   |
| D. Full Name, Mailing Address and ZIP Code<br><b>Morgan Stanley Dean Witter &amp; Co PAC</b><br>1300 I Street, NW, Suite 1200 West<br>Washington, DC 20005                        | Name of Employer<br><b>Morgan Stanley Dean Witter &amp; Co PAC</b><br>Occupation                                     | Date<br><b>05-30-00</b><br><b>06-28-00</b> | Amount this pd.<br><b>\$1,000.00</b><br><b>\$1,000.00</b> |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$2,500.00</b>   |  |   |
| E. Full Name, Mailing Address and ZIP Code<br><b>Financial Services Roundtable PAC</b><br>805 Fifteenth Street, NW, Suite 600<br>Washington, DC 20005                             | Name of Employer<br><b>Financial Services Roundtable PAC</b><br>Occupation   | Date<br><b>05-10-00</b>                    | Amount this pd.<br><b>\$1,000.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$1,000.00</b>   |  |   |
| F. Full Name, Mailing Address and ZIP Code<br><b>New York Mercantile Exchange PAC INC</b><br>1 North End Avenue, World Financial Center<br>New York, NY 10282                     | Name of Employer<br><b>New York Mercantile Exchange PAC INC</b><br>Occupation  | Date<br><b>05-10-00</b>                    | Amount this pd.<br><b>\$1,000.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$1,000.00</b>   |  |   |
| G. Full Name, Mailing Address and ZIP Code<br><b>American Maritime Officers AFL-CIO Voluntary Political Action Fund</b><br>650 Fourth Avenue<br>Brooklyn, NY 11232                | Name of Employer<br><b>American Maritime Officers AFL-CIO Voluntary Political Action Fund</b><br>Occupation          | Date<br><b>05-10-00</b>                    | Amount this pd.<br><b>\$1,000.00</b>                      |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date > <b>\$1,000.00</b>   |  |   |

SUBTOTAL of Receipts This Page (optional) > **\$7,000.00**TOTAL This Period (last page this line number only) > **-----**

## SCHEDULE A

## ITEMIZED RECEIPTS

## Contributions from Other Political Committees

|                       |      |
|-----------------------|------|
| PAGE 2                | OF 4 |
| FOR LINE NUMBER 11(c) |      |

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

|   |                           |                      |                 |
|---|---------------------------|----------------------|-----------------|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>American Bankers Association BANKPAC</b><br><b>1120 Connecticut Avenue, NW</b><br><b>Washington, DC 20036</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                             | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 05-10-00<br>06-23-00 |                 |
|   | Year-to-Date > \$2,000.00 |                      |                 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>(same as above)</b><br>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 06-23-00             |                 |
|   | Year-to-Date > \$3,000.00 |                      |                 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Bank of America Corporation PAC</b><br><b>1000 North Tryon Street</b><br><b>Charlotte, NC 28255</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                       | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 05-10-00             |                 |
|   | Year-to-Date > \$1,000.00 |                      |                 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>New York Stock Exchange Inc. PAC</b><br><b>801 Pennsylvania Avenue, NW, Suite 630</b><br><b>Washington, DC 20004</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 05-10-00             |                 |
|   | Year-to-Date > \$500.00   |                      |                 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Chicago Mercantile Exchange PAC</b><br><b>30 South Wacker Drive</b><br><b>Chicago, IL 60606</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 05-30-00             |                 |
|   | Year-to-Date > \$1,000.00 |                      |                 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>UDV Employees' Political Participation Committee</b><br><b>1301 K Street, NW - East Tower - Suite 1000</b><br><b>Washington, DC 20005</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation                | 06-13-00             |                 |
|   | Year-to-Date > \$1,000.00 |                      |                 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Providian Financial Corporation PAC</b><br><b>201 Mission Street, 10th Floor</b><br><b>San Francisco, CA 94105</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | Name of Employer          | Date                 | Amount this pd. |
|   | Occupation<br>Treasurer   | 06-13-00             |                 |
|   | Year-to-Date > \$1,500.00 |                      |                 |
| SUBTOTAL of Receipts This Page (optional) >   |                           |                      | \$7,500.00      |
| TOTAL This Period (last page this line number only) >   |                           |                      | -----           |

## SCHEDULE A

## ITEMIZED RECEIPTS

|                       |      |
|-----------------------|------|
| PAGE 3                | OF 4 |
| FOR LINE NUMBER 11(c) |      |

## Contributions from Other Political Committees

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|   |   |                  |                               |
|---|---|------------------|-------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Countrywide PAC<br>155 North Lake Avenue<br>Pasadena, CA 91109  | Name of Employer<br><br>Occupation                      | Date<br>06-13-00 | Amount this pd.<br>\$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$1,000.00       |                               |
| B. Full Name, Mailing Address and ZIP Code<br>American General Corporation PAC<br>1101 Pennsylvania Avenue, NW, Suite 1035<br>Washington, DC 20004  | Name of Employer<br><br>Occupation                      | Date<br>06-15-00 | Amount this pd.<br>\$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$1,000.00       |                               |
| C. Full Name, Mailing Address and ZIP Code<br>Advanta Corp PAC<br>Post Office Box 15170<br>Wilmington, DE 19850   | Name of Employer<br><br>Occupation                      | Date<br>06-15-00 | Amount this pd.<br>\$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$1,000.00       |                               |
| D. Full Name, Mailing Address and ZIP Code<br>Realtors PAC<br>430 North Michigan Avenue<br>Chicago, IL 60611  | Name of Employer<br><br>Occupation                      | Date<br>06-20-00 | Amount this pd.<br>\$3,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$4,000.00       |                               |
| E. Full Name, Mailing Address and ZIP Code<br>Building & Construction Trades Dept. Federal Pol. <i>LOCAL</i><br>815 16th Street, NW, Suite 600 <i>Education Fund</i><br>Washington, DC 20006-4104 | Name of Employer<br><br>Occupation                      | Date<br>06-28-00 | Amount this pd.<br>\$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$5,000.00       |                               |
| F. Full Name, Mailing Address and ZIP Code<br>Carpenters' Legislative Improvement Committee<br>101 Constitution Avenue, NW<br>Washington, DC 20001  | Name of Employer<br><br>Occupation<br>General President | Date<br>06-30-00 | Amount this pd.<br>\$5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$5,000.00       |                               |
| G. Full Name, Mailing Address and ZIP Code<br>House PAC<br>2700 Sanders Road<br>Prospect Heights, IL 60070  | Name of Employer<br><br>Occupation                      | Date<br>06-30-00 | Amount this pd.<br>\$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | Year-to-Date >  | \$1,000.00       |                               |
| SUBTOTAL of Receipts This Page (optional) >   | \$17,000.00   |                  |                               |
| TOTAL This Period (last page this line number only) >   |   |                  |                               |



## SCHEDULE A

## ITEMIZED RECEIPTS

## Contributions from Other Political Committees

|                       |      |
|-----------------------|------|
| PAGE 4                | OF 4 |
| FOR LINE NUMBER 11(c) |      |

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (In Full)

Pete King for Congress

C00272211

|  |                           |          |                                   |
|--|---------------------------|----------|-----------------------------------|
| A. Full Name, Mailing Address and ZIP Code<br>Ernst & Young PAC<br>1225 Connecticut Avenue, NW<br>Washington, DC 20036                 | Name of Employer          | Date     | Amount this pd.<br><br>\$1,000.00 |
|  | Occupation                | 06-30-00 |                                   |
|  | Year-to-Date > \$1,000.00 |          |                                   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                           |          |                                   |
| B. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| C. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| D. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| E. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| F. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| G. Full Name, Mailing Address and ZIP Code   | Name of Employer          | Date     | Amount this pd.                   |
|  | Occupation                |          |                                   |
|  | Year-to-Date >            |          |                                   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |                           |          |                                   |
| SUBTOTAL of Receipts This Page (optional) >  |                           |          | \$1,000.00                        |
| TOTAL This Period (last page this line number only) >  |                           |          | \$32,500.00                       |

**SCHEDULE B**                      **ITEMIZED DISBURSEMENTS**  
**Operating Expenditures**

**PAGE 1 OF 8**  
**FOR LINE NUMBER 17**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**

**C00272211**

|   |  |                                |  |
|---|--|--------------------------------|--|
| <b>A. Full Name, Address and ZIP Code</b><br><b>American Express Centurian Bank</b><br><b>Suite 0002</b><br><b>Chicago, IL 60679-0002</b> | <b>Purpose of Disbursement</b><br><b>see memo entries</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>04-20-00</b> | <b>Amount</b><br><b>\$189.23</b><br><b>Credit Card Payment</b>   |
| <b>B. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>   | <b>Purpose of Disbursement</b><br><b>see memo entries</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>05-22-00</b> | <b>Amount</b><br><b>\$947.12</b><br><b>Credit Card Payment</b>   |
| <b>C. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>   | <b>Purpose of Disbursement</b><br><b>see memo entries</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>06-16-00</b> | <b>Amount</b><br><b>\$1,672.71</b><br><b>Credit Card Payment</b> |
| <b>D. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>   | <b>Purpose of Disbursement</b><br><b>see memo entries</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>04-18-00</b> | <b>Amount</b><br><b>\$4,513.89</b><br><b>Credit Card Payment</b> |
| <b>E. Full Name, Address and ZIP Code</b><br><b>Delta Airlines</b><br><b>National Airport</b><br><b>Washington, DC 20001</b>              | <b>Purpose of Disbursement</b><br><b>airline tickets</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:  | <b>Date</b><br><b>04-18-00</b> | <b>Amount</b><br><b>\$127.00</b><br><b>Credit Card MEMO</b>      |
| <b>F. Full Name, Address and ZIP Code</b><br><b>Federal Express</b><br><b>Post Office Box 727</b><br><b>Memphis, TN 38194</b>             | <b>Purpose of Disbursement</b><br><b>package delivery</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>05-22-00</b> | <b>Amount</b><br><b>\$14.30</b><br><b>Credit Card MEMO</b>       |
| <b>G. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>   | <b>Purpose of Disbursement</b><br><b>package delivery</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><b>06-16-00</b> | <b>Amount</b><br><b>\$23.22</b><br><b>Credit Card MEMO</b>       |
| <b>H. Full Name, Address and ZIP Code</b><br><b>Dubliner Restaurant</b><br><b>520 North Capitol Street</b><br><b>Washington, DC 2</b>     | <b>Purpose of Disbursement</b><br><b>MEALS</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:            | <b>Date</b><br><b>04-20-00</b> | <b>Amount</b><br><b>\$55.50</b><br><b>Credit Card MEMO</b>       |
| <b>I. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>   | <b>Purpose of Disbursement</b><br><b>MEALS</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:            | <b>Date</b><br><b>06-16-00</b> | <b>Amount</b><br><b>\$453.35</b><br><b>Credit Card MEMO</b>      |

**SUBTOTAL of Disbursements This Page (optional)** ..... > **\$7,322.95**

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

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

|                    |      |
|--------------------|------|
| PAGE 2             | OF 6 |
| FOR LINE NUMBER 17 |      |

## Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|   |   |                 |  |
|---|---|-----------------|--|
| A. Full Name, Address and ZIP Code<br><b>Dubliner Restaurant</b><br><b>520 North Capitol Street</b><br><b>Washington, DC 2</b>            | Purpose of Disbursement<br><b>MEALS</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b> | <b>\$281.62</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| B. Full Name, Address and ZIP Code<br><b>U-Haul</b><br><b>225 Route 110</b><br><b>Farmingdale, NY 11735</b>                               | Purpose of Disbursement<br><b>storage</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>05-22-00</b> | <b>\$79.95</b><br><b>Credit Card</b><br><b>MEMO</b>    |
| C. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>  | Purpose of Disbursement<br><b>storage</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>06-16-00</b> | <b>\$79.95</b><br><b>Credit Card</b><br><b>MEMO</b>    |
| D. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>  | Purpose of Disbursement<br><b>storage</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b> | <b>\$77.95</b><br><b>Credit Card</b><br><b>MEMO</b>    |
| E. Full Name, Address and ZIP Code<br><b>Chase Master Card</b><br><b>Post Office 15836</b><br><b>Wilmington, DE 19880-5826</b>            | Purpose of Disbursement<br><b>see memo entries</b>  | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b> | <b>\$70.95</b><br><b>Credit Card</b><br><b>Payment</b> |
| F. Full Name, Address and ZIP Code<br><b>Congressional Federal Credit Union</b><br><b>Post Office Box 3322</b><br><b>Oakton, VA 22124</b> | Purpose of Disbursement<br><b>parking</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-01-00</b> | <b>\$18.00</b>   |
| G. Full Name, Address and ZIP Code<br><b>Abco Art</b><br><b>Sunrise Highway</b><br><b>Bellmore, NY 11710</b>                              | Purpose of Disbursement<br><b>framing</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>06-01-00</b> | <b>\$170.51</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| H. Full Name, Address and ZIP Code<br><b>CVS Pharmacy</b><br><b>Wantagh Avenue</b><br><b>Wantagh, NY 11793</b>                            | Purpose of Disbursement<br><b>film developing</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>05-22-00</b> | <b>\$98.44</b><br><b>Credit Card</b><br><b>MEMO</b>    |
| I. Full Name, Address and ZIP Code<br><b>O'Neill's Restaurant</b><br><b>729 Third Avenue</b><br><b>New York City, NY 10017</b>            | Purpose of Disbursement<br><b>parking</b>   | Date            | Amount   |
|   | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>05-22-00</b> | <b>\$103.54</b><br><b>Credit Card</b><br><b>MEMO</b>   |

SUBTOTAL of Disbursements This Page (optional) ..... > **\$88.95**

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

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

|                    |      |
|--------------------|------|
| PAGE 3             | OF 8 |
| FOR LINE NUMBER 17 |      |

## Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|  |   |          |                                |
|--|---|----------|--------------------------------|
| A. Full Name, Address and ZIP Code<br>O'Neill's Restaurant<br>729 Third Avenue<br>New York City, NY 10017              | Purpose of Disbursement<br>meal   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 08-16-00 | \$44.32<br>Credit Card<br>MEMO |
| B. Full Name, Address and ZIP Code<br>Bell Atlantic<br>Post Office Box 64268<br>Baltimore, MD 21264                    | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 04-05-00 | \$86.35                        |
| C. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 06-01-00 | \$68.98                        |
| D. Full Name, Address and ZIP Code<br>Bell Atlantic Mobile<br>Box 15559<br>Worcester, MA 01615                         | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 05-01-00 | \$130.14                       |
| E. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 06-01-00 | \$154.10                       |
| F. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 04-05-00 | \$248.84                       |
|  |   | 05-08-00 | \$124.10                       |
| G. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>telephone bill   | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 05-08-00 | \$69.05                        |
| H. Full Name, Address and ZIP Code<br>U.S. Postal Service<br>Cannon Building<br>Washington, DC 20515                   | Purpose of Disbursement<br>postage  | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 08-14-00 | \$147.99                       |
| I. Full Name, Address and ZIP Code<br>Nassau County Conservative Committee<br>36 Sunrise Street<br>Plainview, NY 11803 | Purpose of Disbursement<br>internal ad  | Date     | Amount                         |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 04-05-00 | \$200.00                       |

SUBTOTAL of Disbursements This Page (optional) ..... > \$1,561.56

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

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

|                    |      |
|--------------------|------|
| PAGE 4             | OF 8 |
| FOR LINE NUMBER 17 |      |

## Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)

Pete King for Congress

C00272211

| A. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
|--|---|----------------------|----------------------|
| Nassau County Conservative Committee<br>36 Sunrise Street<br>Plainview, NY 11803 | ticket purchase<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:      | 05-08-00             | \$400.00             |
| B. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| Cameta Camera<br>243 Broadway<br>Amityville, NY 11701                            | photo developing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:     | 04-18-00             | \$179.95             |
| C. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| (same as above)  | photo developing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:     | 04-20-00<br>04-10-00 | \$207.31<br>\$78.47  |
| D. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| Petty Cash<br>Box 1428<br>Seaford, NY 11783                                      | petty cash<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:           | 06-09-00             | \$200.00             |
| E. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| (same as above)  | postage<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:              | 05-10-00             | \$200.00             |
| F. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| Quick's Photo Service<br>1877 Bellmore Avenue<br>Bellmore, NY 11710              | photo developing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:     | 04-05-00             | \$300.00             |
| G. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| (same as above)  | photo developing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:     | 05-10-00             | \$75.07              |
| H. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| Peter T. King<br>1442 Roth Road<br>Seaford, NY 11783                             | dues<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                 | 04-01-00             | \$145.00             |
| I. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date                 | Amount               |
| (same as above)  | taxi, tolls, parking<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 04-14-00<br>05-26-00 | \$215.00<br>\$112.00 |

SUBTOTAL of Disbursements This Page (optional) ..... > \$2,112.80

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

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**  
**Operating Expenditures**

PAGE 5 OF 8  
 FOR LINE NUMBER  
 17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
**Pete King for Congress**

**C00272211**

|  |   |                                    |   |
|--|---|------------------------------------|---|
| A. Full Name, Address and ZIP Code<br><b>Capitol Hill Club</b><br><b>300 First St SE</b><br><b>Washington, DC 20003</b>                    | Purpose of Disbursement<br><b>MEALS</b>   | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b>                    | <b>\$41.53</b>  |
| B. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>   | Purpose of Disbursement<br><b>meal</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>05-22-00</b><br><b>06-07-00</b> | <b>\$9.49</b><br><b>\$5.74</b>                          |
| C. Full Name, Address and ZIP Code<br><b>Borders Books and Music</b><br><b>Old Country Road</b><br><b>Westbury, NY 11590</b>               | Purpose of Disbursement<br><b>book purchase</b>   | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>06-16-00</b>                    | <b>\$43.39</b><br><b>Credit Card</b><br><b>MEMO</b>     |
| D. Full Name, Address and ZIP Code<br><b>Chase Manhattan Bank</b><br><b>3875 Merrick Road</b><br><b>Seaford, NY 11783</b>                  | Purpose of Disbursement<br><b>see memo entries</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>06-01-00</b>                    | <b>\$472.46</b><br><b>Credit Card</b><br><b>Payment</b> |
| E. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>   | Purpose of Disbursement<br><b>membership fee</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b>                    | <b>\$20.00</b><br><b>Credit Card</b><br><b>MEMO</b>     |
| F. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>   | Purpose of Disbursement<br><b>late fee</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b>                    | <b>\$29.00</b><br><b>Credit Card</b><br><b>MEMO</b>     |
| G. Full Name, Address and ZIP Code<br><b>District Photo</b><br><b>10501 Rhode Island Avenue</b><br><b>Beltsville, MD 20705</b>             | Purpose of Disbursement<br><b>photos</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>04-18-00</b>                    | <b>\$148.62</b>   |
| H. Full Name, Address and ZIP Code<br><br><b>(same as above)</b>   | Purpose of Disbursement<br><b>photo developing</b>  | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>05-22-00</b><br><b>06-14-00</b> | <b>\$15.85</b><br><b>\$11.94</b>                        |
| I. Full Name, Address and ZIP Code<br><b>Town of Hempstead Republican Committee</b><br><b>164 Post Avenue</b><br><b>Westbury, NY 11590</b> | Purpose of Disbursement<br><b>ticket purchase</b>   | Date                               | Amount  |
|  | For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>06-14-00</b>                    | <b>\$200.00</b>   |

SUBTOTAL of Disbursements This Page (optional) ..... > **\$905.63**

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

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

|                    |      |
|--------------------|------|
| PAGE 6             | OF 8 |
| FOR LINE NUMBER 17 |      |

## Operating Expenditures

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

| A. Full Name, Address and ZIP Code   | Purpose of Disbursement   | Date     | Amount   |
|--|---|----------|----------|
| Nassau County Republican Committee<br>64 Post Avenue<br>Westbury, NY 11590   | ticket purchase<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                              | 04-14-00 | \$600.00 |
| B. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>data<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:              | 04-26-00 | \$200.00 |
| C. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>ticket purchase<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:   | 06-01-00 | \$80.00  |
| D. Full Name, Address and ZIP Code<br>SD Associates<br>PO Box 4565<br>Hartford, CT 06147                                     | Purpose of Disbursement<br>computer data<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:     | 04-18-00 | \$240.05 |
| E. Full Name, Address and ZIP Code<br>Bar Harbour Gallery and Frame Shop<br>1011 Park Boulevard<br>Massapequa Park, NY 11762 | Purpose of Disbursement<br>framing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:           | 04-26-00 | \$401.45 |
| F. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>framing<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:           | 05-10-00 | \$65.10  |
| G. Full Name, Address and ZIP Code<br>South Shore Tribune<br>4 California Place<br>Island Park, NY 11558                     | Purpose of Disbursement<br>ad<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                | 05-08-00 | \$250.00 |
| H. Full Name, Address and ZIP Code<br>(same as above)  | Purpose of Disbursement<br>ad<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                | 06-14-00 | \$250.00 |
| I. Full Name, Address and ZIP Code<br>Gado Baskets<br>532 W. 30th Street<br>New York, NY 10007                               | Purpose of Disbursement<br>constituent gifts<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | 04-10-00 | \$312.68 |

SUBTOTAL of Disbursements This Page (optional) > \$2,399.28

TOTAL This Period (last page this line number only) > -----

**SCHEDULE B**                      **ITEMIZED DISBURSEMENTS**

**Operating Expenditures**

**PAGE 7 OF 8**  
**FOR LINE NUMBER 17**

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

**NAME OF COMMITTEE (in Full)**  
**Pete King for Congress**

**C00272211**

|  |  |                                    |   |
|--|--|------------------------------------|---|
| <b>A. Full Name, Address and ZIP Code</b><br><b>Chabad of Port Washington</b><br><b>164 Post Avenue</b><br><b>Westbury, NY 11590</b>             | <b>Purpose of Disbursement</b><br><b>ticket purchase</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:    | <b>Date</b><br><br><b>06-05-00</b> | <b>Amount</b><br><br><b>\$250.00</b>  |
| <b>B. Full Name, Address and ZIP Code</b><br><b>Hofstra University Club</b><br><b>225 Hofstra University</b><br><b>Hempstead,, NY 11550</b>      | <b>Purpose of Disbursement</b><br><b>deposit for 7/24</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:   | <b>Date</b><br><br><b>06-07-00</b> | <b>Amount</b><br><br><b>\$300.00</b>  |
| <b>C. Full Name, Address and ZIP Code</b><br><b>First Impressions</b><br><b>85 Adams Court</b><br><b>Plainview, NY 11803</b>                     | <b>Purpose of Disbursement</b><br><b>fundraising letter</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | <b>Date</b><br><br><b>06-23-00</b> | <b>Amount</b><br><br><b>\$11,882.92</b>                                     |
| <b>D. Full Name, Address and ZIP Code</b><br><b>New York Times Crossword Society</b><br><b>229 West 43rd Street</b><br><b>New York, NY 10036</b> | <b>Purpose of Disbursement</b><br><b>photos</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:             | <b>Date</b><br><br><b>06-01-00</b> | <b>Amount</b><br><br><b>\$280.00</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| <b>E. Full Name, Address and ZIP Code</b><br><b>U.S. Air</b><br><b>LaGuardia Airport</b><br><b>New York City, NY 1</b>                           | <b>Purpose of Disbursement</b><br><b>airline tickets</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:    | <b>Date</b><br><br><b>04-20-00</b> | <b>Amount</b><br><br><b>\$204.00</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| <b>F. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>  | <b>Purpose of Disbursement</b><br><b>airline tickets</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:    | <b>Date</b><br><br><b>05-22-00</b> | <b>Amount</b><br><br><b>\$313.50</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| <b>G. Full Name, Address and ZIP Code</b><br><br><b>(same as above)</b>  | <b>Purpose of Disbursement</b><br><b>airline tickets</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:    | <b>Date</b><br><br><b>04-18-00</b> | <b>Amount</b><br><br><b>\$204.00</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| <b>H. Full Name, Address and ZIP Code</b><br><b>Continental Airlines</b><br><b>Houston Airport</b><br><b>Houston, TX 0</b>                       | <b>Purpose of Disbursement</b><br><b>airline tickets</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:    | <b>Date</b><br><br><b>04-18-00</b> | <b>Amount</b><br><br><b>\$752.82</b><br><b>Credit Card</b><br><b>MEMO</b>   |
| <b>I. Full Name, Address and ZIP Code</b><br><b>Powerscourt Restaurant</b><br><b>520 N. Capitol Street NW</b><br><b>Washington, DC 20001</b>     | <b>Purpose of Disbursement</b><br><b>fundraiser</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:         | <b>Date</b><br><br><b>04-18-00</b> | <b>Amount</b><br><br><b>\$1,689.18</b><br><b>Credit Card</b><br><b>MEMO</b> |

**SUBTOTAL of Disbursements This Page (optional)** ..... > **\$12,432.92**

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



## SCHEDULE B

## ITEMIZED DISBURSEMENTS

PAGE 8 OF 8

## Operating Expenditures

FOR LINE NUMBER  
17

Information copied from these Reports may not be sold or used for soliciting contributions or commercial purposes, other than using the name and address of a political committee to solicit contributions from it.

NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|   |  |                         |  |
|---|--|-------------------------|--|
| A. Full Name, Address and ZIP Code<br><b>Paddy's Loft</b><br><b>1286 Hicksville Road</b><br><b>Massapequa, NY 11758</b> | Purpose of Disbursement<br><b>constituent meals</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | Date<br><b>04-18-00</b> | Amount<br><b>\$929.20</b><br><b>Credit Card</b><br><b>MEMO</b> |
| B. Full Name, Address and ZIP Code<br><b>UNITEMIZED DISBURSEMENTS</b>   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount<br><b>\$676.36</b>                                      |
| C. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| D. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| E. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| F. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| G. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| H. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |
| I. Full Name, Address and ZIP Code  | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                             | Date                    | Amount   |

SUBTOTAL of Disbursements This Page (optional) ..... > **\$676.36**

TOTAL This Period (last page this line number only) ..... > **\$27,500.45**

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

## Refunds to Individuals/Persons

|                       |      |
|-----------------------|------|
| PAGE 1                | OF 1 |
| FOR LINE NUMBER 20(a) |      |

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NAME OF COMMITTEE (in Full)  
Pete King for Congress

C00272211

|  |   |                         |                             |
|--|---|-------------------------|-----------------------------|
| A. Full Name, Address and ZIP Code<br><b>Lewis Meltzer</b><br><b>190 Willis Avenue</b><br><b>Mineola, NY 11501</b> | Purpose of Disbursement<br><b>refund of contribution</b><br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other: | Date<br><b>06-28-00</b> | Amount<br><b>\$1,000.00</b> |
| B. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| C. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| D. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| E. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| F. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| G. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| H. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |
| I. Full Name, Address and ZIP Code   | Purpose of Disbursement<br>For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other:                                  | Date                    | Amount                      |

SUBTOTAL of Disbursements This Page (optional) ..... > **\$1,000.00**

TOTAL This Period (last page this line number only) ..... > **\$1,000.00**

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

|   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Hand Delivered   | Date of Receipt                      |
| <input type="checkbox"/> First Class Mail   | POSTMARKED                           |
| <input checked="" type="checkbox"/> Registered/Certified Mail                       | POSTMARKED (R/C)<br>7/11/00          |
| <input type="checkbox"/> No Postmark  |                                      |
| <input type="checkbox"/> Postmark Illegible   |                                      |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt                      |
| <input type="checkbox"/> Received from the Senate Office of Public Records          | Date of Receipt                      |
| <input type="checkbox"/> Other ( Specify):  | Postmarked<br>and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing  |                                      |
| <p><i>J.A.C.</i><br/>PREPARER</p> <p><i>7/14/00</i><br/>DATE PREPARED</p>           |                                      |