

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 JUL 13 A 9 45

1. NAME OF COMMITTEE (in full)

Steve Rothman For Congress, Inc.

ADDRESS (number and street)

Post Office Box 714

CITY, STATE and ZIP CODE

Hackensack, NJ 07602

Check if different than previously reported.

STATE/DISTRICT

2. FEC IDENTIFICATION NUMBER

C00313494

3. IS THIS REPORT AN AMENDMENT?

YES

NO

## 4. TYPE OF REPORT

April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Twelfth day report preceding

(Type of Election)

election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on

\_\_\_\_\_ in the State of \_\_\_\_\_

Termination Report

This report contains activity for

Primary Election

General Election

Special Election

Runoff Election

## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
05/18/2000 through 06/30/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	92,075.00	219,167.00
(b) Total Contribution Refunds (From Line 20(d))	100.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	91,975.00	219,067.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	22,218.22	64,050.32
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	22,218.22	64,050.32
8. Cash on Hand at Close of Reporting Period (from Line 27)	451,453.87	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

For further information:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

**BART MORGELLI**

Signature of Treasurer

Date

6/12/00

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

**FEC FORM 3**  
(Revised 4/87)

**Detailed Summary Page**  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Steve Rothman For Congress, Inc.	Report Covering the Period: From: 05/18/2000 To: 06/30/2000	
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A) .....	56,050.00	
(ii) Unitemized .....	3,525.00	
(iii) Total of contributions from individual .....	59,575.00	137,467.00
(b) Political Party Committees .....		850.00
(c) Other Political Committees (such as PACs) .....	33,500.00	80,850.00
(d) The Candidate .....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)(ii), (b), (c) and (d))	92,075.00	219,167.00
<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, Rebates, etc.)</b> .....		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> .....	2,820.00	6,214.84
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> .....	94,695.00	225,381.84
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b> .....	22,218.22	64,050.32
<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) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....	100.00	100.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) .....	100.00	100.00
<b>21. OTHER DISBURSEMENTS</b> .....	11,800.00	49,850.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b> .....	33,918.22	114,000.32
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b> .....		390,677.09
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b> .....		94,695.00
<b>25. SUBTOTAL (add Line 23 and Line 24)</b> .....		485,372.09
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)</b> .....		33,918.22
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b> .....		451,453.87

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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

**NAME OF COMMITTEE (in full)**  
Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas Antonicello 415 Washington Boulevard #1008 Marina Del Rey, CA 90292- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Unique Homes Occupation Real Estate Broker	05/25/2000	50.00
Aggregate Year-to-Date ->		275.00	
B. Full Name, Mailing Address and Zip Code Deborah Bery 130 Walnut Street Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Self Occupation Jeweler	05/31/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	
C. Full Name, Mailing Address and Zip Code Douglas Bern 285 Booth Avenue Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Kaufman Gilbert & Bern Occupation Attorney	05/22/2000 Redesignation of 12/6/99 contr	250.00
Aggregate Year-to-Date ->		500.00	MEMO
D. Full Name, Mailing Address and Zip Code Beth Barnstein 175 Hillside Avenue Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Eos Management Occupation CFO	05/31/2000	500.00
Aggregate Year-to-Date ->		500.00	
E. Full Name, Mailing Address and Zip Code Marshall Brachman 444 Carbery Place East Washington, DC 20002- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Brachman Companies Occupation Lobbyist	05/24/2000	500.00
Aggregate Year-to-Date ->		500.00	
F. Full Name, Mailing Address and Zip Code Sheila Britz 1120 Park Avenue #20A New York, NY 10128-1242 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Decorator	06/30/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	
G. Full Name, Mailing Address and Zip Code Shalom Bronstein 736 Grange Road Teaneck, NJ 07666-4238 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Jeweler	06/11/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,050.00
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)  
Steve Rothman For Congress, Inc.

<p>A. Full Name, Mailing Address and Zip Code Joseph Brownstein 11 Maple Closter, NJ 07624-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Accountant</p> <p>Aggregate Year-to-Date -&gt; 0.00</p>	<p>Date (month, day, year) 05/22/2000</p> <p>Redesignation of 11/26/99 cont</p>	<p>Amount of each Receipt this Period 1,000.00</p> <p>MEMO</p>
<p>B. Full Name, Mailing Address and Zip Code Marco Cengialosi 109 Midland Avenue Kilmwood Park, NJ 07407-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Dor-Win</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p>Date (month, day, year) 05/22/2000</p> <p>Redesignation of 12/6/99 contr</p>	<p>Amount of each Receipt this Period 500.00</p> <p>MEMO</p>
<p>C. Full Name, Mailing Address and Zip Code John Capazzi 596 Anderson Avenue Englewood Cliffs, NJ 07632-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Architect</p> <p>Aggregate Year-to-Date -&gt; 0.00</p>	<p>Date (month, day, year) 05/22/2000</p> <p>Redesignation of 12/1/99 contr</p>	<p>Amount of each Receipt this Period 250.00</p> <p>MEMO</p>
<p>D. Full Name, Mailing Address and Zip Code Ben Chouake 663 Palisade Avenue Cliffside Park, NJ 07010-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p>Date (month, day, year) 06/04/2000</p>	<p>Amount of each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Ben Chouake 663 Palisade Avenue Cliffside Park, NJ 07010-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Self</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/04/2000</p>	<p>Amount of each Receipt this Period 750.00</p>
<p>F. Full Name, Mailing Address and Zip Code Alan Cohen 10 Nelson Place Tenafly, NJ 07670-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Alison Cohen 10 Nelson Place Tenafly, NJ 07670-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Weil, Gotshal &amp; Manges</p> <p>Occupation special events</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (IN FULL)**  
 Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alison Cohen 10 Nelson Place Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Weil, Gotshal & Manges Occupation: special events	06/05/2000	1,000.00
Aggregate Year-to-Date ->		2,000.00	
Matthew Cohen 10 Nelson Place Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	None Occupation: Student	06/05/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	
Matthew Cohen 10 Nelson Place Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation: Student	06/05/2000	1,000.00
Aggregate Year-to-Date ->		2,000.00	
Myrna Cohen 10 Nelson Place Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	None Occupation: Retired	06/05/2000	1,000.00
Aggregate Year-to-Date ->		1,000.00	
Myrna Cohen 10 Nelson Place Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	None Occupation: Retired	06/05/2000	1,000.00
Aggregate Year-to-Date ->		2,000.00	
Maxine Cole 11 Kimberly Way River Edge, NJ 07661- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Information Requested Occupation: Information Requested	06/01/2000	300.00
Aggregate Year-to-Date ->		300.00	
Judy Cummins 1512 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	None Occupation: Retired	06/01/2000	300.00
Aggregate Year-to-Date ->		300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,600.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	4	12
FOR LINE NUMBER		
11(a) (1)		

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**NAME OF COMMITTEE (in full)**  
 Steve Rothman For Congress, Inc.

<b>A. Full Name, Mailing Address and Zip Code</b> Eric DeGesero PO Box 2002 Branchville, NJ 07826- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Fuel Merchants Assn of NJ <b>Occupation</b> Executive VP Aggregate Year-to-Date -> 0.00	<b>Date (month, day, year)</b> 05/22/2000 Redesignation of 12/5/99 contr Aggregate Year-to-Date -> 0.00	<b>Amount of each Receipt this Period</b> 500.00 MEMO
<b>B. Full Name, Mailing Address and Zip Code</b> Daniel Della Vecchia 78 Hoover Street North Arlington, NJ 07031- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b>  <b>Occupation</b> Aggregate Year-to-Date -> 500.00	<b>Date (month, day, year)</b> 06/23/2000	<b>Amount of each Receipt this Period</b> 500.00
<b>C. Full Name, Mailing Address and Zip Code</b> Mark Druck 142 Palisade Avenue Jersey City, NJ 07306- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Self <b>Occupation</b> Doctor Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 06/11/2000	<b>Amount of each Receipt this Period</b> 1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Marvin Eichen 1 Rosalind Placae, Apt. 2DE Lawrence, NY 11559- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> Self <b>Occupation</b> Accountant Aggregate Year-to-Date -> 500.00	<b>Date (month, day, year)</b> 06/04/2000	<b>Amount of each Receipt this Period</b> 500.00
<b>E. Full Name, Mailing Address and Zip Code</b> Marian Ellman 53 Cragmere Road Suffern, NY 10901- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> None <b>Occupation</b> Homemaker Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 06/01/2000	<b>Amount of each Receipt this Period</b> 1,000.00
<b>F. Full Name, Mailing Address and Zip Code</b> Marian Ellman 53 Cragmere Road Suffern, NY 10901- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None <b>Occupation</b> Homemaker Aggregate Year-to-Date -> 2,000.00	<b>Date (month, day, year)</b> 06/01/2000	<b>Amount of each Receipt this Period</b> 1,000.00
<b>G. Full Name, Mailing Address and Zip Code</b> Edward Epstein 11 Barbara Drive Englewood Cliffs, NJ 07632- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> None <b>Occupation</b> Retired Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 06/01/2000	<b>Amount of each Receipt this Period</b> 1,000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	5,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (IN FULL)**  
Steve Rothman For Congress, Inc.

<p><b>A. Full Name, Mailing Address and Zip Code</b> Eleanor Epstein 11 Barbara Drive Englewood Cliffs, NJ 07632-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> None</p> <p><b>Occupation</b> Retired</p> <p><b>Date (month, day, year)</b> 06/01/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b> Larry Epstein 134 Oxford Drive Tenafly, NJ 07670-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b> Alden Leeds, Inc.</p> <p><b>Occupation</b> Executive</p> <p><b>Date (month, day, year)</b> 06/01/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b> Nancy Epstein 134 Oxford Drive Tenafly, NJ 07670-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b> Alden Leeds, Inc.</p> <p><b>Occupation</b> Executive</p> <p><b>Date (month, day, year)</b> 06/01/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b> Constance Fink 1530 Palisade Avenue Fort Lee, NJ 07024-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b> None</p> <p><b>Occupation</b> Retired</p> <p><b>Date (month, day, year)</b> 06/02/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 500.00</p>	<p><b>Amount of Each Receipt this Period</b> 500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b> Mark Finkel 182 Hillside Avenue Englewood, NJ 07631-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b> Emerging Growth Association</p> <p><b>Occupation</b> Investor</p> <p><b>Date (month, day, year)</b> 05/31/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b> Lawrence Fisher 120 Birmingham Lane Jamesburg, NJ 08831-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b> None</p> <p><b>Occupation</b> Retired</p> <p><b>Date (month, day, year)</b> 06/01/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 500.00</p>	<p><b>Amount of Each Receipt this Period</b> 500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b> David Pollender 1512 Palisade Avenue #15J Fort Lee, NJ 07024-5315</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b> None</p> <p><b>Occupation</b> Retired</p> <p><b>Date (month, day, year)</b> 06/04/2000</p> <p><b>Aggregate Year-to-Date -&gt;</b> 1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> 1,000.00</p>

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

6,000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL) Steve Rothman For Congress, Inc.			
<b>A. Full Name, Mailing Address and Zip Code</b> David Follender 1512 Palisade Avenue #15J Fort Lee, NJ 07024-5315 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None  <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 06/04/2000  Aggregate Year-to-Date -> 2,000.00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>B. Full Name, Mailing Address and Zip Code</b> Samuel Geltman 1530 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None  <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 06/01/2000  Aggregate Year-to-Date -> 500.00	<b>Amount of Each Receipt this Period</b> 500.00
<b>C. Full Name, Mailing Address and Zip Code</b> Lisa Goldstein 2000 Linwood Avenue #12L Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 06/01/2000  Aggregate Year-to-Date -> 1,000.00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Bernard Greenspan 1 Broadway Elmwood Park, NJ 07407- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Self  <b>Occupation</b> Doctor	<b>Date (month, day, year)</b> 05/01/2000 Supporting Info from Prev. Period  Aggregate Year-to-Date -> 250.00	<b>Amount of Each Receipt this Period</b> 250.00  MEMO
<b>E. Full Name, Mailing Address and Zip Code</b> Bernard Greenspan 1 Broadway Elmwood Park, NJ 07407- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Self  <b>Occupation</b> Doctor	<b>Date (month, day, year)</b> 05/22/2000 Redesignation of 12/6/99 contr  Aggregate Year-to-Date -> 250.00	<b>Amount of Each Receipt this Period</b> 250.00  MEMO
<b>F. Full Name, Mailing Address and Zip Code</b> Kenneth Greif Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> Self  <b>Occupation</b> Investor	<b>Date (month, day, year)</b> 06/04/2000  Aggregate Year-to-Date -> 1,000.00	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>G. Full Name, Mailing Address and Zip Code</b> Jeffrey Heilpern 148 Norma Road Teaneck, NJ 07666- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> UJA Federation  <b>Occupation</b> Educational Services	<b>Date (month, day, year)</b> 06/11/2000  Aggregate Year-to-Date -> 250.00	<b>Amount of Each Receipt this Period</b> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	3,750.00
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category on this Detailed Summary Page	PAGE	OF
	7	12
FOR LINE NUMBER		
11(a)(i)		

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

NAME OF COMMITTEE (IN FULL) Steve Rothman For Congress, Inc.			
<b>A. Full Name, Mailing Address and Zip Code</b> Henie Horton 179 Mohawk Drive River Edge, NJ 07661-1725 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None <b>Occupation</b> Retired Aggregate Year-to-Date -> 250.00	<b>Date (month, day, year)</b> 05/30/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>B. Full Name, Mailing Address and Zip Code</b> Shirley Jacoby 1530 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> Self <b>Occupation</b> Tool Distributor Aggregate Year-to-Date -> 350.00	<b>Date (month, day, year)</b> 06/02/2000	<b>Amount of Each Receipt this Period</b> 350.00
<b>C. Full Name, Mailing Address and Zip Code</b> Kim Kelly 131 E. 69th Street, Apt. 7A New York, NY 10021- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> Insight Communications <b>Occupation</b> Executive Vice President & COO Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 05/30/2000	<b>Amount of Each Receipt this Period</b> 1,000.00
<b>D. Full Name, Mailing Address and Zip Code</b> Mary Lambo 3589 South Ocean Boulevard #L601 Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None <b>Occupation</b> Retired Aggregate Year-to-Date -> 300.00	<b>Date (month, day, year)</b> 05/24/2000	<b>Amount of Each Receipt this Period</b> 300.00
<b>E. Full Name, Mailing Address and Zip Code</b> Julius Marder 1530 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None <b>Occupation</b> Retired Aggregate Year-to-Date -> 250.00	<b>Date (month, day, year)</b> 06/01/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>F. Full Name, Mailing Address and Zip Code</b> Rica Merendino 315 Oakwood Road Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	<b>Name of Employer</b> None <b>Occupation</b> Homemaker Aggregate Year-to-Date -> 250.00	<b>Date (month, day, year)</b> 05/29/2000	<b>Amount of Each Receipt this Period</b> 250.00
<b>G. Full Name, Mailing Address and Zip Code</b> Ted Moskowitz Four Gateway Center 100 Mulberry Street Newark, NJ 07101-0652 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> McCarter & English <b>Occupation</b> Attorney Aggregate Year-to-Date -> 1,000.00	<b>Date (month, day, year)</b> 06/30/2000	<b>Amount of Each Receipt this Period</b> 1,000.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	3,400.00
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (IN FULL)  
Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of Each Receipt this Period
Brian Neary 26 Walther Avenue Ridgewood, NJ 07450- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self Occupation Attorney	05/22/2000 Redesignation of 11/19/99 cont	500.00
Aggregate Year-to-Date ->		250.00	MEMO
B. Full Name, Mailing Address and Zip Code John Patrick 23 Norwich Circle Niceville, FL 32578- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer Fuji Photo Film Occupation Vice President	Date (Month, day, year) 05/18/2000	Amount of Each Receipt this Period 500.00
Aggregate Year-to-Date ->		1,000.00	
C. Full Name, Mailing Address and Zip Code Herbert Foster 1500 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer None Occupation Retired	Date (Month, day, year) 06/01/2000	Amount of Each Receipt this Period 250.00
Aggregate Year-to-Date ->		250.00	
D. Full Name, Mailing Address and Zip Code Marvin Rabbiner 1500 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer None Occupation Retired	Date (Month, day, year) 06/01/2000	Amount of Each Receipt this Period 500.00
Aggregate Year-to-Date ->		500.00	
E. Full Name, Mailing Address and Zip Code Fred Rosenberg 1512 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer None Occupation Retired	Date (Month, day, year) 06/01/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	
F. Full Name, Mailing Address and Zip Code Walter Rothschild 1520 Palisade Avenue #23B Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer None Occupation Retired	Date (Month, day, year) 06/01/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	
G. Full Name, Mailing Address and Zip Code Leon Rubach P.O. Box 202 Berkeley Place Alpine, NJ 07620- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer None Occupation Retired	Date (Month, day, year) 06/06/2000	Amount of Each Receipt this Period 1,000.00
Aggregate Year-to-Date ->		1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		
11(a)(i)		

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

NAME OF COMMITTEE (IS FULL)  
Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code Leon Rubach P.O. Box 202 Berkeley Place Alpine, NJ 07620- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Name of Employer None Occupation Retired Date (month, day, year) 06/06/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00	
B. Full Name, Mailing Address and Zip Code Leonard Rubin 11 Berkeley Drive Tenafly, NJ 07670- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Name of Employer LDR Equities Occupation Investor Date (month, day, year) 06/01/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00	
C. Full Name, Mailing Address and Zip Code Seymour Eadinoff 341 Mountain Road Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Name of Employer Beacon Loom Occupation Executive Date (month, day, year) 05/30/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00	
D. Full Name, Mailing Address and Zip Code V. Robert Salazar 999 18th Street Suite 3300 Denver, CO 80202- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Name of Employer Salazar and Solomon Occupation Executive Date (month, day, year) 05/31/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 1,000.00	
E. Full Name, Mailing Address and Zip Code V. Robert Salazar 999 18th Street Suite 3300 Denver, CO 80202- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary		Name of Employer Salazar and Solomon Occupation Executive Date (month, day, year) 05/31/2000 Amount of Each Receipt this Period 1,000.00 Aggregate Year-to-Date -> 2,000.00	
F. Full Name, Mailing Address and Zip Code Otto Salmon 1530 Palisade Avenue Fort Lee, NJ 07024- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary		Name of Employer None Occupation Retired Date (month, day, year) 06/01/2000 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00	
G. Full Name, Mailing Address and Zip Code Iris Rothman Schwartz P.O. Box 1081 12 Tulip Tree Lane Alpine, NJ 07620- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary		Name of Employer Self Occupation Homemaker Date (month, day, year) 05/31/2000 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date -> 250.00	

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (IN FULL)  
Steve Rothman For Congress, Inc.

<p>A. Full Name, Mailing Address and Zip Code Eva Shaff 180 East End Avenue New York, NY 10028-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 250.00</p>	<p>Date (month, day, year) 06/01/2000</p>	<p>Amount of each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Leon Sokol 433 Hackensack Avenue Hackensack, NJ 07601-4321</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Sokol Behot &amp; Figrenko</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p>Date (month, day, year) 05/23/2000</p>	<p>Amount of each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Milton Steren 3515 Henry Hudson Parkway Bronx, NY 10463-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Allan Weiss 377 Walnut Street Englewood, NJ 07631-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Tuxedo Company</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Allan Weiss 377 Walnut Street Englewood, NJ 07631-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tuxedo Company</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -&gt; 2,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Cathy Weiss 377 Walnut Street Englewood, NJ 07631-3124</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Self</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Cathy Weiss 377 Walnut Street Englewood, NJ 07631-3124</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -&gt; 2,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (IN FULL)  
Steve Rothman For Congress, Inc.

<p>A. Full Name, Mailing Address and Zip Code Dorothy Weiss 2 Bay Club Drive Flushing, NY 11360-2935</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Self</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Dorothy Weiss 2 Bay Club Drive Flushing, NY 11360-2935</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 2,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Neil Weiss 27 N. Pond Rd. Cresskill, NJ 07626</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Tuxedo Company</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Neil Weiss 27 N. Pond Rd. Cresskill, NJ 07626</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tuxedo Company</p> <p>Occupation Manager</p> <p>Aggregate Year-to-Date -&gt; 2,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Stacy Weiss 27 N. Pond Rd. Cresskill, NJ 07626</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Stacy Weiss 27 N. Pond Rd. Cresskill, NJ 07626</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer Self</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date -&gt; 2,000.00</p>	<p>Date (month, day, year) 06/05/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Inge Wettraich 20 Hidden Ledge Road Englewood, NJ 07631</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p>Name of Employer None</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p>Date (month, day, year) 05/30/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

SUBTOTAL of Receipts This Page (optional)	7,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
 Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code Michael Willner 377 Lydecker Street Englewood, NJ 07631- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Insight Communications Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 05/30/2000	Amount of each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Sherry Wilzig Izak 4 Windermere Ct. Livingston, NJ 07039- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Name of Employer Trust Company of New Jersey Occupation Executive Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 06/01/2000	Amount of each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
D. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
E. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
F. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
G. Full Name, Mailing Address and Zip Code  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer  Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional)	2,000.00
<b>TOTAL</b> This Period (last page this line number only)	55,050.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**NAME OF COMMITTEE (in full)**  
 Steve Rothman For Congress, Inc.

<p><b>A. Full Name, Mailing Address and Zip Code</b>                  American Federation of State, County, and Municipal Employees PAC                  1625 L Street NW                  Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  06/14/2000</p> <p>2,000.00</p>	<p><b>Amount of Each Receipt this Period</b>                  2,000.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b>                  American Society of Anesthesiologists Political Action Committee                  520 N. Northwest Highway                  Chicago, IL 60668-2573</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  06/16/2000</p> <p>1,500.00</p>	<p><b>Amount of Each Receipt this Period</b>                  1,500.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b>                  AT&amp;T PAC                  c/o Matthew D. Langan                  1120 20th Street NW                  Washington, DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  06/08/2000</p> <p>500.00</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b>                  Association of Trial Lawyers of America Political Action Committee                  1050 31st Street NW                  Washington, DC 20007-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  05/30/2000</p> <p>5,000.00</p>	<p><b>Amount of Each Receipt this Period</b>                  5,000.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b>                  American Association of Orthopaedic Surgeons                  Massachusetts Avenue NE                  Washington, DC 20002-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  06/02/2000</p> <p>500.00</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b>                  American Health Care Association                  c/o Mike Hogan                  1201 L Street NW                  Washington, DC 20005-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  05/23/2000</p> <p>500.00</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>G. Full Name, Mailing Address and Zip Code</b>                  American Horse Council Committee "COLT"                  1700 K St. NW, No. 300                  Washington, DC 20006-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (Month, day, year)</b>                  05/24/2000</p> <p>500.00</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>

<b>SUBTOTAL</b> of Receipts This Page (optional)	10,500.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**NAME OF COMMITTEE (in full)**  
 Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Maritime Officers Voluntary Political Action Fund 550 4th Street Brooklyn, NY 11232-		05/18/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation		
	Aggregate Year-to-Date ->	1,500.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Postal Workers PAC c/o Moe Biller, President 1300 L Street NW Washington, DC 20005-		06/07/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation		
	Aggregate Year-to-Date ->	1,000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Sugarbeet Growers Association 1156 15th Street NW Suite 11 Washington, DC 20005-1704		06/08/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation		
	Aggregate Year-to-Date ->	500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Match Association PAC 1201 Pennsylvania Avenue NW P.O. Box 464 Washington, DC 20044-		05/25/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation		
	Aggregate Year-to-Date ->	500.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bank of America PAC 730 15th Street NW  Washington, DC 20005-		05/23/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation		
	Aggregate Year-to-Date ->	500.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Build Political Action Committee of the National Association of Home Builders 1201 15th Street NW Washington, DC 20005-2800		06/20/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	5,000.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Community Action Program Political Action Committee 2100 M Street, Suite 604 Washington, DC 20036-1207		06/16/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	2,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	10,000.00
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the detailed Summary Page

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

NAME OF COMMITTEE (IN FULL)			
Steve Rothman For Congress, Inc.			
A. Full Name, Mailing Address and Zip Code The Chase Manhattan Corporation Fund for Good Government 230 Park Avenue New York, NY 10017-	Name of Employer  Occupation	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,000.00		
B. Full Name, Mailing Address and Zip Code The Chase Manhattan Corporation Fund for Good Government 230 Park Avenue New York, NY 10017-	Name of Employer  Occupation	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 1,500.00		
C. Full Name, Mailing Address and Zip Code Direct Voice, The Political Action Committee of the Direct Marketing Assoc. 1111 - 19th Street, Suite 1100 Washington, DC 20036-3603	Name of Employer  Occupation	Date (month, day, year) 05/25/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Aggregate Year-to-Date -> 500.00		
D. Full Name, Mailing Address and Zip Code Human Rights Campaign PAC c/o Winnie Stachelberg 913 18th Street NW Washington, DC 20006-	Name of Employer  Occupation	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Aggregate Year-to-Date -> 500.00		
E. Full Name, Mailing Address and Zip Code MCI Worldcom, Inc. Political Action Committee 500 Clinton Center Drive Clinton, MS 39056-	Name of Employer  Occupation	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Aggregate Year-to-Date -> 500.00		
F. Full Name, Mailing Address and Zip Code Metropolitan Life Insurance Company Employees' Political Participation Fund 1620 L Street, NW, Suite 800 Washington, DC 20036-	Name of Employer  Occupation	Date (month, day, year) 06/04/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Aggregate Year-to-Date -> 500.00		
G. Full Name, Mailing Address and Zip Code National Association of Retired Federal Employees 606 North Washington Street Alexandria, VA 22314-	Name of Employer  Occupation	Date (month, day, year) 06/19/2000	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> 2,000.00		

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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

NAME OF COMMITTEE (in full)  
Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Association of Securities and Commercial Law Attorneys PAC c/o Pomerantz Haudek Block Grossman New York, NY 10017-	Occupation	06/10/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	500.00	
B. Full Name, Mailing Address and Zip Code National Committee to Preserve Social Security and Medicare Federal PAC 10 G Street NE, Suite 600 Washington, DC 20002-4125	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation	06/01/2000	500.00
Aggregate Year-to-Date ->	500.00		
C. Full Name, Mailing Address and Zip Code NORPAC PAC c/o David Schluskel Box 5595 Englewood, NJ 07631-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	06/14/2000	1,000.00
Aggregate Year-to-Date ->	1,000.00		
D. Full Name, Mailing Address and Zip Code National Air Traffic Controllers PAC c/o Ken Montoya 1150 17th Street NW Washington, DC 20036-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation	05/22/2000	500.00
Aggregate Year-to-Date ->	500.00		
E. Full Name, Mailing Address and Zip Code Planned Parenthood Action Fund Inc. 1120 Connecticut Avenue #461 NW Washington, DC 20004-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation	05/25/2000	500.00
Aggregate Year-to-Date ->	500.00		
F. Full Name, Mailing Address and Zip Code SAPEC - NJ 411 North Avenue East Cranford, NJ 07016-2444	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation	06/04/2000	500.00
Aggregate Year-to-Date ->	500.00		
G. Full Name, Mailing Address and Zip Code Sears PAC 1333 Beverly Road Hoffman Estates, IL 60179-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary	Occupation	05/30/2000	500.00
Aggregate Year-to-Date ->	500.00		

SUBTOTAL of Receipts This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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

**NAME OF COMMITTEE (IN FULL)**  
**Steve Rothman For Congress, Inc.**

<p><b>A. Full Name, Mailing Address and Zip Code</b>                  Stone &amp; Webster PAC                  900 19th Street NW Suite 600                  Washington, DC 20006-2105</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p><b>Date (month, day, year)</b>                  05/23/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>B. Full Name, Mailing Address and Zip Code</b>                  Time Warner, Inc. PAC                  c/o Timothy A. Boggs                  75 Rockefeller Plaza                  New York, NY 10019-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; 1,000.00</p>	<p><b>Date (month, day, year)</b>                  06/30/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p>
<p><b>C. Full Name, Mailing Address and Zip Code</b>                  International Union, United Automobile                  Aerospace &amp; Agricultural Implement                  Workers of America - UAW V CAP                  Detroit, MI 48214-3963</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p><b>Date (month, day, year)</b>                  05/24/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>D. Full Name, Mailing Address and Zip Code</b>                  Union of Needletrades Industrial and                  Textile Employees Campaign Committee                  1710 Broadway                  New York, NY 10019-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) Primary</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; 500.00</p>	<p><b>Date (month, day, year)</b>                  06/06/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  500.00</p>
<p><b>E. Full Name, Mailing Address and Zip Code</b>                  Union of Needletrades Industrial and                  Textile Employees Campaign Committee                  1710 Broadway                  New York, NY 10019-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt; 1,500.00</p>	<p><b>Date (month, day, year)</b>                  06/30/2000</p>	<p><b>Amount of Each Receipt this Period</b>                  1,000.00</p>
<p><b>F. Full Name, Mailing Address and Zip Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b>                  / /</p>	<p><b>Amount of Each Receipt this Period</b></p>
<p><b>G. Full Name, Mailing Address and Zip Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date -&gt;</p>	<p><b>Date (month, day, year)</b>                  / /</p>	<p><b>Amount of Each Receipt this Period</b></p>

<b>SUBTOTAL</b> of Receipts This Page (optional)	3,500.00
<b>TOTAL</b> This Period (last page this line number only)	33,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)  
 Steve Rothman For Congress, Inc.

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Merrill Lynch 2200 Fletcher Avenue Fort Lee, NJ 07024-	INTEREST INCOME	06/30/2000	2,620.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	6,214.84
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month, day, year)	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	/ /	

SUBTOTAL of Receipts This Page (optional)	2,620.00
TOTAL This Period (last page this line number only)	2,620.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	5
FOR LINE NUMBER		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (In Full)**  
 Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T Universal Business Card Post Office Box 410437 Salt Lake City, UT 84141-	See below Disbursement for: <input type="checkbox"/> Privacy <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	1,965.44
GTE Air Phone	Phone Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	506.86 MEMO
Postmaster State Street Hackensack, NJ 07601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	279.86 MEMO
Postmaster State Street Hackensack, NJ 07601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	33.00 MEMO
Radisson Hotel Route 4 West Englewood, NJ 07631-	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	113.23 MEMO
Radisson Hotel Route 4 West Englewood, NJ 07631-	Accommodations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	500.00 MEMO
Southwest Airlines Washington, DC 20003-	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	245.00 MEMO

<b>SUBTOTAL</b> of Disbursements This Page (optional)	1,965.44
<b>TOTAL</b> This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OP
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NAME OF COMMITTEE (in full)  
 Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic 79 Route 37 West Toms River, NJ 08755-	Phone charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/19/2000	124.95
Bell Atlantic 79 Route 37 West Toms River, NJ 08755-	Phone Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	109.25
Cantrell/Cutter Printing 1789 Olive Street Capital Heights, MD 20743-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/19/2000	1,244.68
Capitol Promotions 2363 Oakdale Avenue Glenside, PA 19038-	Peris Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/2000	1,100.00
Gioia Cassidy 51 Cherry Place Hilledale, NJ 07642-	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/31/2000	1,500.00
National Democratic Club 30 Ivy Street, SE Washington, DC 20003-	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/19/2000	363.12
Erickson & Company 38 Ivy Street SE Washington, DC 20003-	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/2000	3,016.30

SUBTOTAL of Disbursements This Page (optional)	7,458.30
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 5  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**  
Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	18.60
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	32.00
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	32.00
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	15.22
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/2000	64.52
Federal Express Post Office Box 1140 Memphis, TN 38101-	Express Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/2000	18.86
Herten Burstein c/o Thomas Herten 25 Main Street Hackensack, NJ 07601-	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/2000	240.00

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

421.20

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the detailed Summary Page	PAGE	OF
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FOR LINE NUMBER		
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**NAME OF COMMITTEE (In Full)**  
 Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David Hull 5689 Strathmore Lane Dublin, OH 43017-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	3,813.87
David Hull 5689 Strathmore Lane Dublin, OH 43017-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/03/2000	3,813.87
Internal Revenue Service Holtsville, NY	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	1,698.63
Mayerhofer & Associates 10301 Democracy Lane Fairfax, VA 22030-	Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	242.48
MCI Post Office Box 42925 Philadelphia, PA 19107-	Fax charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/08/2000	378.54
Arline Miller 442 Oak Avenue River Edge, NJ 07661-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/03/2000	756.19
Papson Printing Corporation 113 Hudson Street Hackensack, NJ 07602-	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/14/2000	132.50

<b>SUBTOTAL</b> of Disbursements This Page (optional)	10,836.08
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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

**NAME OF COMMITTEE (In Full)**  
 Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paychex 50 Tice Boulevard Post Office Box 1209 Woodcliff Lake, NJ 07675-	Payroll Preparation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/12/2000	75.20
Postmaster State Street Hackensack, NJ 07601-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/2000	104.40
Princeton Ins Co. PO Box 7777 Philadelphia, PA 19175-	Workmen's Compensation Ins. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/30/2000	394.00
R.S.V.P. 2930 Prosperity Avenue Fairfax, VA 22031-	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/2000	376.05
Adam Zellner 1617 Westover Drive Linden, NJ 07036-	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/2000	300.68
		/ /	
		/ /	

<b>SUBTOTAL</b> of Disbursements This Page (optional)	1,250.33
<b>TOTAL</b> This Period (last page this line number only)	21,931.35

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
20c		

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**NAME OF COMMITTEE (In Full)**  
 Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic PAC  c/o Art Guida 1717 Arch Street 47-S Philadelphia, PA 19103-	Refund of ticket price  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/25/2000	100.00
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	

<b>SUBTOTAL</b> of Disbursements This Page (optional)	100.00
<b>TOTAL</b> This Period (last page this line number only)	100.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in full)**  
Steve Rothman For Congress, Inc.

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jim Marshall For Congress P.O. Box 125 Guyton, GA 31312-	Contribution U.S. House GA-8 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00
Mary Ann Connolly For Congress P.O. Box 280 Fanwood, NJ 07023-	Contribution U.S. House NJ-7 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/15/2000	1,000.00
Mike Honda for Congress PO Box 41205 San Jose, CA 95160-	Contribution U.S. House CA-15 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00
Mike Ross For Congress P.O. Box 360 Prescott, AR 71857-	Contribution U.S. House AR-4 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00
Mike Stedem For Congress 1240-A East Main Street Bartow, FL 33830-	Contribution U.S. House FL-12 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00
Paul Perry For Congress 1101 Professional Boulevard Evansville, IN 47714-	Contribution U.S. House IN-8 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00
Roy For Congress P.O. Box 685 Benton, KY 42025-	Contribution U.S. House KY-1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/2000	1,000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	7,000.00
<b>TOTAL</b> This Period (last page this line number only)	

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7-13-00
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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 and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>See</i> PREPARER	7-13-00 DATE PREPARED