

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Doheny for Congress

ADDRESS (number and street) 107 Court Street

PO Box 257

Check if different than previously reported. (ACC)

Watertown NY 13601

2. **FEC IDENTIFICATION NUMBER** C00462853

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NY 23

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 07 01 2009 through 09 30 2009

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 Jeffrey Kirkby

Signature of Treasurer Electronically Filed by Jeffrey Kirkby Date 01 06 2011

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Doheny for Congress

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	286200.00	286200.00
(b) Total Contribution Refunds (from Line 20(d)).....	286200.00	286200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	165262.11	165262.11
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	165262.11	165262.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	334738.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	500000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Doheny for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

284550.00

284550.00

(ii) Unitemized.....

1650.00

1650.00

(iii) TOTAL of contributions

286200.00

286200.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

286200.00

286200.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

500000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

500000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

286200.00

786200.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	165262.11	165262.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	286200.00	286200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	286200.00	286200.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	451462.11	451462.11

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	500001.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	286200.00
25. SUBTOTAL (add Line 23 and Line 24).....	786201.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	451462.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	334738.89

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Marc Abrams

Mailing Address 787 7th Avenue

City State Zip Code
New York NY 10019

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Willkie Farr & Gallagher LLP Lawyer

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 500.00

Date of Receipt M M / D D / Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4331

Amount of Each Receipt this Period 500.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Matthew Adler

Mailing Address 4012 Sunnyside Avenue North

City State Zip Code
Seattle WA 98103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
DLA Piper LLP (US) Lawyer

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4216

Amount of Each Receipt this Period 4800.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Appel Associates LLC

Mailing Address 22 Brae Burn Drive

City State Zip Code
Purchase NY 10577

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt M M / D D / Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4276

Amount of Each Receipt this Period 4800.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) 10100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 6 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Joanne Bane

Mailing Address 60 Lawrence Avenue

City State Zip Code
Lawrence NY 11559

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 06 / 2009

Transaction ID: SA11AI.4324

Amount of Each Receipt this Period 4800.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Mark I Bane

Mailing Address 60 Lawrence Avenue

City State Zip Code
Lawrence NY 11559

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Ropes & Grey LLP Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 06 / 2009

Transaction ID: SA11AI.4323

Amount of Each Receipt this Period 4800.00

Ind. Contr.

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

Mailing Address 19333 Collins Avenue

City State Zip Code
Sunny Isles Beach FL 33160

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Larkspur Properties LP President

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4335

Amount of Each Receipt this Period 2500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) 12100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Raj Bhattacharyya

Mailing Address 10 East End Avenue
#9M

City State Zip Code
New York NY 10075

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Deutsche Bank Investment Banking

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.4204

Amount of Each Receipt this Period
2400.00

Ind. Contr.

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

Mailing Address 115 Poplar Drive

City State Zip Code
Roslyn NY 11576

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Paul Hastings, Ganofsky & Walker Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	5	/	2	0	0	9

Transaction ID: SA11AI.4317

Amount of Each Receipt this Period
4800.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Scott Bok

Mailing Address 48 Twin Lakes Rd

City State Zip Code
Salisbury CT 06068

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Greenhill & Co. Investment Banker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.4189

Amount of Each Receipt this Period
2000.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) 9200.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. John Brecker		Date of Receipt
	Mailing Address 111 Garden Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 01 / 2009
	City	State	Zip Code
	Scarsdale	NY	10583
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4271
Name of Employer Longacker Fund Management LLC		Occupation Managing Principal	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> 4800.00
			Ind. Contr.

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Brodsky		Date of Receipt
	Mailing Address 414 Sterling Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 06 / 2009
	City	State	Zip Code
	Harrison	NY	10528
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4273
Name of Employer Quest Turnaround Advisors		Occupation Managing Director	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> 4800.00
			Ind. Contr.

C.	Full Name (Last, First, Middle Initial) Mrs. Lori Brodsky		Date of Receipt
	Mailing Address 414 Sterling Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 06 / 2009
	City	State	Zip Code
	Harrison	NY	10528
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4274
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> 4800.00
			Ind. Contr.

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 14400.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Buckalew

Mailing Address 150 East 69th Street
Apt. 5DE

City State Zip Code
New York NY 10021

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Greenhill & Co. LLC Banking

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4188

Amount of Each Receipt this Period
500.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Alan Carr

Mailing Address 166 East 61st Street
Apt. 4N

City State Zip Code
New York NY 10065

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Strategic Value Partners, LLC Financial Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4192

Amount of Each Receipt this Period
2400.00

Ind. Contr.

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

Mailing Address 5 East 22nd Street
Apt 9F

City State Zip Code
New York NY 10010

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Venor Capital Financial Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4210

Amount of Each Receipt this Period
500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) 3400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Cofsky

Mailing Address 7 O'Reilly Court

City State Zip Code
Croton on Hudson NY 10520

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

Name of Employer Occupation
Perella Weinberg Partners Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4311

Amount of Each Receipt this Period
1000.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Peter Corbell

Mailing Address 1849 Valley Park Avenue

City State Zip Code
Hermosa Beach CA 90254

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

Name of Employer Occupation
Stroock & Stroock & Lavan LLP Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2009

Transaction ID: SA11AI.4257

Amount of Each Receipt this Period
1200.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Michael Curreri

Mailing Address 245 E 21st Street
Apt. 12-A

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Deutsche Bank Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4202

Amount of Each Receipt this Period
4800.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Hilty David

Mailing Address 388 West Broadway
Apt.5

City State Zip Code
New York NY 10012

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

Name of Employer
Houlihan Lokey Howard & Zukin

Occupation
Banker

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4205

Amount of Each Receipt this Period

4800.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Harrison Lane Denman

Mailing Address 51 Madison Avenue
22nd floor

City State Zip Code
New York NY 10010

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

Name of Employer
Quinn Emmanuel Urquhard LLP

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 02 / 2009

Transaction ID: SA11AI.4252

Amount of Each Receipt this Period

400.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Donoho

Mailing Address 28 Union Hill Road

City State Zip Code
Madison NJ 07940

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

Name of Employer
Lovells LLP

Occupation
Lawyer

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4206

Amount of Each Receipt this Period

250.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

5450.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mrs Cathy Dougherty	Date of Receipt MM / DD / YYYY 07 / 16 / 2009
	Mailing Address 1160 Park Avenue Apt.8D	Transaction ID: SA11AI.4350
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Homemaker homemaker	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) Mr. John Dougherty	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 1160 Park Avenue Apt.8D	Transaction ID: SA11AI.4215
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Ingalls & Snyder Finance	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Dennis F Dunne	Date of Receipt MM / DD / YYYY 07 / 04 / 2009
	Mailing Address 4 Valley Road	Transaction ID: SA11AI.4280
	City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Milbank Tweed Hadley McCoy LLP Attorney	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	▶	9600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Timothy Dwyer

Mailing Address 60 Beacon Hill Lane

City State Zip Code
New Canaan CT 06840

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

Name of Employer Occupation
Entitle Direct Group, Inc. CEO

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 13 / 2009

Transaction ID: SA11AI.4182

Amount of Each Receipt this Period
1000.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Joshua W Easterly

Mailing Address 168 5th Avenue
Apt.402

City State Zip Code
New York NY 10011

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

Name of Employer Occupation
Goldman Sachs & Co. Banker

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4314

Amount of Each Receipt this Period
1200.00

Ind. Contr.

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

Mailing Address 240 W. 98th Street
Apt.10B

City State Zip Code
New York NY 10025

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

Name of Employer Occupation
Quinn Emmanuel Urquhard LLP Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4263

Amount of Each Receipt this Period
2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **4600.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gerald M Esposito

Mailing Address 43 Bunker Lane

City State Zip Code
Hicksville NY 11801

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

Name of Employer Occupation
Sirius Radio Graphic Artist

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4261

Amount of Each Receipt this Period
2400.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. John C Esposito

Mailing Address 546 Highland Avenue

City State Zip Code
Ridgewood NJ 07450

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

Name of Employer Occupation
Capstone Advisory Group LLC Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4279

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 756 Washington Street
Apt. 3D

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Deutsche Bank Securities Inc. Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4315

Amount of Each Receipt this Period
2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **9600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Ben Finestone

Mailing Address 666 Greenwich Street
#849

City State Zip Code
New York NY 10014

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

Name of Employer
Quinn Emanuel Urquhart Ol-
iver

Occupation
Lawyer

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4212

Amount of Each Receipt this Period

400.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Mr. Evan Flaschen

Mailing Address 242 Hubbard Street

City State Zip Code
Glastonbury CT 06033

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

Name of Employer
Bracewell & Giuliani LLP

Occupation
Lawyer

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4190

Amount of Each Receipt this Period

4800.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)
Mr. Avram Friedman

Mailing Address 845 West End Avenue
Apt. 15E

City State Zip Code
New York NY 10025

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

Name of Employer
KasowitzBensonTorresFried-
man

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 06 / 2009

Transaction ID: SA11AI.4265

Amount of Each Receipt this Period

2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

7600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Philip Giordano

Mailing Address 2392 Hawthorne Drive

City State Zip Code
Yorktown Heights NY 10598

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

Name of Employer Occupation
Deutsche Bank Analyst

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2009

Transaction ID: SA11AI.4208

Amount of Each Receipt this Period
1200.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Robert Greenhill

Mailing Address 433 Riversville Road

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
Greenhill & Co. Chairman

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2009

Transaction ID: SA11AI.4184

Amount of Each Receipt this Period
500.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Grubb

Mailing Address 279 East 44th Street
Apt. 20E

City State Zip Code
New York NY 10017

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

Name of Employer Occupation
Greenhill & Co. LLC Investment Banking

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 09 / 2009

Transaction ID: SA11AI.4177

Amount of Each Receipt this Period
500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel Guyder

Mailing Address 76 Willetts Road

City State Zip Code
Mount Kisko NY 10549

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

Name of Employer Occupation
Allen & Overy LLP Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary 750.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4339

Amount of Each Receipt this Period

750.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Mr. Jonathan Harris

Mailing Address 200 East 71st Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Alternative Investment Mn- Investments

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2009

Transaction ID: SA11AI.4378

Amount of Each Receipt this Period

500.00

Ind. Contribution

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Henkin

Mailing Address 330 August Circle

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
Jeffreys & Company, Inc. Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4253

Amount of Each Receipt this Period

500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Jesse Hibbard		Date of Receipt
	Mailing Address 3804 Wentwood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 21 / 2009
	City	State	Zip Code
	Dallas	TX	75225
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4355
Name of Employer Fulcrum Capital		Occupation Finance	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 2400.00
			Ind. Contr.

B.	Full Name (Last, First, Middle Initial) Mr. Matthew Hirschfield		Date of Receipt
	Mailing Address 66 Spring Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 20 / 2009
	City	State	Zip Code
	Muttontown	NY	11791
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4374
Name of Employer Merrill Lynch		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 500.00
			Ind. Contr.

C.	Full Name (Last, First, Middle Initial) Ms Kimberly D Huffard		Date of Receipt
	Mailing Address 138 Manfield Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 15 / 2009
	City	State	Zip Code
	Darien	CT	06820
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4312
Name of Employer Sothebys		Occupation Real Estate Broker	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼	<input type="text"/> Amount <input type="text"/> 1000.00
			Ind. Contr.

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> Amount <input type="text"/> 3900.00
TOTAL This Period (last page this line number only)	<input type="text"/> Amount <input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 94
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Dan Kamensky

Mailing Address 11 Greenway

City Roslyn State NY Zip Code 11576

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

Name of Employer Paulsen & Co. Occupation Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 15 / 2009
Transaction ID: SA11AI.4194
 Amount of Each Receipt this Period 1000.00
 Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Eric Kaup

Mailing Address 117 3rd Street

City Wilmette State IL Zip Code 60091

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

Name of Employer Hilco Trading LLC Occupation Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 07 / 20 / 2009
Transaction ID: SA11AI.4361
 Amount of Each Receipt this Period 4800.00
 Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Kevin Kavanagh

Mailing Address 115 Drake Smith Lane

City Rye State NY Zip Code 10580

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

Name of Employer Taconic Capitol Advisors Occupation Trader

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 07 / 15 / 2009
Transaction ID: SA11AI.4203
 Amount of Each Receipt this Period 4800.00
 Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► 10600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas Kempner

Mailing Address 65 East 55th Street
floor 19

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Davidson Kempner Capital Investment Manager
Mngt

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Special-Primary

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2009

Transaction ID: SA11AI.4380

Amount of Each Receipt this Period

4800.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Sapina Kirpalani

Mailing Address 27 Chauncey Place

City State Zip Code
Woodbury NY 11797

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Special-General

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4267

Amount of Each Receipt this Period

2400.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)
Susheel Kirpalani

Mailing Address 27 Chauncey Place

City State Zip Code
Woodbury NY 11797

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

Name of Employer Occupation
Quinn Emmanuel Urquhard Attorney
LLP

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Special-General

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4268

Amount of Each Receipt this Period

2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 94

(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)

Susheel & Sapina Kirpalani

Mailing Address 27 Chauncey Place

City State Zip Code
Woodbury NY 11797

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

Name of Employer
Quinn Emmanuel Urquhard LLP

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
4800.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2009

Transaction ID: SA11AI.4283

Amount of Each Receipt this Period

4800.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)

Mr. Shervin J Korangy

Mailing Address 40 E. 94th Street
Apt.16CD

City State Zip Code
New York NY 10128

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

Name of Employer
Blackstone Group

Occupation
Managing Director

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 12 / 2009

Transaction ID: SA11AI.4308

Amount of Each Receipt this Period

500.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)

Mr. Stuart Kovensky

Mailing Address 18 Long Pond Road

City State Zip Code
Armon NY 10504

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

Name of Employer
Onex Credit Partners

Occupation
Portfolio Manager

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4195

Amount of Each Receipt this Period

250.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

5550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address 1247 Oenoke Ridge

City State Zip Code
New Canaan CT 06840

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

Name of Employer Occupation
Perella Weinberg Partners Partner

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 9600.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2009

Transaction ID: SA11AI.4325

Amount of Each Receipt this Period
9600.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Daniel Krueger

Mailing Address 260 Park Avenue, Apt 6-I

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
Owl Creek Asset Management Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2009

Transaction ID: SA11AI.4179

Amount of Each Receipt this Period
2500.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Ms Lauren Krueger

Mailing Address 260 Park Avenue, Apt 6-I

City State Zip Code
New York NY 10010

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

Name of Employer Occupation
D.E. Shaw Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 13 / 2009

Transaction ID: SA11AI.4181

Amount of Each Receipt this Period
2500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **14600.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Mayur Lakhani

Mailing Address 201 E 86th Street
Apt.6C

City State Zip Code
New York NY 10028

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

Name of Employer Deutsche Bank Securities Inc. Occupation Analyst

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4272

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 235 E 40 Street
Apt.38D

City State Zip Code
New York NY 10016

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

Name of Employer Marblegate Asset Management Occupation Hedge Fund Analyst

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2009

Transaction ID: SA11AI.4357

Amount of Each Receipt this Period
1200.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Thomas Lauria

Mailing Address 200 South Biscayne Blvd
Suite 4900

City State Zip Code
Miami FL 33131

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

Name of Employer White & Case LLP Occupation Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4209

Amount of Each Receipt this Period
4800.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **10800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Michael J Leffell

Mailing Address 35 Sheldrake Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Davidson Newhard Kempner Money Manager
Cap.

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4262

Amount of Each Receipt this Period
2400.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Zachary Levenick

Mailing Address 639 Hudson Street

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Taconic Capital Financial Consultant

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4200

Amount of Each Receipt this Period
1000.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Zachary Lewis

Mailing Address 142 E. 33rd St
Apt. 6E

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
Monarch Alternative Capital LP Finance

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 06 / 2009

Transaction ID: SA11AI.4169

Amount of Each Receipt this Period
2400.00

Ind. Contribution

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Barbara Lyne	Date of Receipt MM / DD / YYYY 07 / 08 / 2009
	Mailing Address 25 East End Avenue Apt. 11E	Transaction ID: SA11AI.4255
	City State Zip Code New York NY 10028	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Freelance Editor	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. James H MacInnis	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 105 W 13th Street Apt 7E	Transaction ID: SA11AI.4266
	City State Zip Code New York NY 10011	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Deutsche Bank Securities Inc. Analyst	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Keith Markel	Date of Receipt MM / DD / YYYY 07 / 09 / 2009
	Mailing Address 150 Nassau Street Apt. 3E	Transaction ID: SA11AI.4178
	City State Zip Code New York NY 10038	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Dickstein Shapiro LLP Attorney	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	3650.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. James C McCarroll

Mailing Address 599 Lexington Avenue

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Reed Smith LLP Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 08 / 2009

Transaction ID: SA11AI.4288

Amount of Each Receipt this Period
4800.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Hugh McDonald

Mailing Address 21 Balfour Lane

City State Zip Code
Ramsey NJ 07446

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

Name of Employer Occupation
Sonneschein Nath & Rosenthal Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4211

Amount of Each Receipt this Period
500.00

Ind. Contr.

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

Mailing Address 7 Beechwood Lane

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
BCG Mgmt Consultant

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4191

Amount of Each Receipt this Period
500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 27 / 94
	(check only one)	
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. George Mesires	Date of Receipt MM / DD / YYYY 07 / 21 / 2009
	Mailing Address 200 W. Madison Street Suite 3900	Transaction ID: SA11AI.4353
	City State Zip Code Chicago IL 60606	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Barack Ferrazano Lawyer	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Andrew Milgram	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 31 Hillside Drive	Transaction ID: SA11AI.4201
	City State Zip Code Greenwich CT 06830	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Marblegate Asset Management Finance	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Josh Miller	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 50 West 96th Street Apt. 12C	Transaction ID: SA11AI.4198
	City State Zip Code New York NY 10025	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Occupation Taconic Capital Finance	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	7450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Joe Minias

Mailing Address 22 River Terrace
Apt.27H

City State Zip Code
New York NY 10282

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

Name of Employer Occupation
Quinn Emanuel Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2009

Transaction ID: SA11AI.4328

Amount of Each Receipt this Period
500.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Shannon Lowry Nagle

Mailing Address 2166 Broadway
#4F

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
O'Meleeny Myers LLP Lawyer

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
2400.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2009

Transaction ID: SA11AI.4260

Amount of Each Receipt this Period
2400.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Ms Rebecca Parekh

Mailing Address 75 Bank Street
Apt. 6K

City State Zip Code
New York NY 10014

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

Name of Employer Occupation
Deutsche Bank Finance

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2009

Transaction ID: SA11AI.4193

Amount of Each Receipt this Period
500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 94
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Pease	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 1561 Stevenson Road	Transaction ID: SA11AI.4256
	City State Zip Code Hewlett NY 11557	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer: Quinn Emanuel Urquhard LLP Occupation: Attorney Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 1200.00	

B.	Full Name (Last, First, Middle Initial) Mr. Alexander R Perez	Date of Receipt MM / DD / YYYY 07 / 13 / 2009
	Mailing Address 445 Grand Bay Drive Apt.317	Transaction ID: SA11AI.4316
	City State Zip Code Key Biscane FL 33149	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer: Quinn Emanuel Urquhard LLP Occupation: Attorney Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jason Lee Perri	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 1 Morton Avenue Apt.3AE	Transaction ID: SA11AI.4309
	City State Zip Code New York NY 10014	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer: Apollo Capital Management Occupation: Investor Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	4100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Kevin W Phillips

Mailing Address 111 W 67th Street
35-D

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
FBR Capital Markets Sr. Managing Director

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4310

Amount of Each Receipt this Period
500.00

Ind. Contr.

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

Mailing Address 3741 Purdeu Ave

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
Attorney Diamond McCarthy

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4186

Amount of Each Receipt this Period
3000.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Ms Karen Putnam

Mailing Address 160 Riverside Blvd
Apt.15H

City State Zip Code
New York NY 10069

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

Name of Employer Occupation
N/A N/A

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 07 / 2009

Transaction ID: SA11AI.4170

Amount of Each Receipt this Period
2300.00

Ind. Contribution

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Kevin Reed

Mailing Address 42 Claremont Road

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
Quinn Emmanuel Urquhard LLP Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 01 / 2009

Transaction ID: SA11AI.4251

Amount of Each Receipt this Period
250.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Bradley A Robins

Mailing Address 151 E 83rd Street Apt.6A

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Greenhill & Company Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 07 / 2009

Transaction ID: SA11AI.4278

Amount of Each Receipt this Period
4800.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Robins

Mailing Address 151 East 83rd Street

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Special-Primary

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 10 / 2009

Transaction ID: SA11AI.4176

Amount of Each Receipt this Period
4800.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **9850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 94
(check only one)

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

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. William Robins

Mailing Address 715 Baker Street

City State Zip Code
San Francisco CA 94115

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

Name of Employer Occupation
Wells Fargo Product Marketing

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 11 / 2009

Transaction ID: SA11AI.4180

Amount of Each Receipt this Period

250.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Mr. Eric Rosenfeld

Mailing Address 1 Osborn Road

City State Zip Code
Harrison NY 10528

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

Name of Employer Occupation
Crescendo Partners President & CEO

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2009

Transaction ID: SA11AI.4264

Amount of Each Receipt this Period

2400.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)
Megan Schatz

Mailing Address 344 West 72nd Street
Apt.9I

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Morgan Stanley Research Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2009

Transaction ID: SA11AI.4371

Amount of Each Receipt this Period

2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

5050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. William Schatz</p> <p>Mailing Address 344 West 72nd Street Apt. 9I</p> <p>City State Zip Code New York NY 10023</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Fintech Advisory, Inc. Research Analyst</p> <p>Receipt For: 2009 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary 2400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2009</p> <p>Transaction ID: SA11AI.4174</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Ind. Contr.</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Mr. William Schatz</p> <p>Mailing Address 344 West 72nd Street Apt. 9I</p> <p>City State Zip Code New York NY 10023</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Fintech Advisory, Inc. Research Analyst</p> <p>Receipt For: 2009 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General 4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 16 / 2009</p> <p>Transaction ID: SA11AI.4330</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Ind. Contr.</p>
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<p>C. Full Name (Last, First, Middle Initial) Mr. Robert A Schmitz</p> <p>Mailing Address 34 Seville Avenue</p> <p>City State Zip Code Rye NY 10580</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Quest Turnaround Advisors Managing Director</p> <p>Receipt For: 2009 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary 4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2009</p> <p>Transaction ID: SA11AI.4275</p> <p>Amount of Each Receipt this Period 4800.00</p> <p>Ind. Contr.</p>
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SUBTOTAL of Receipts This Page (optional)	9600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address 255 Hudson Street

City State Zip Code
New York NY 10013

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

Name of Employer Venor Capital Occupation Analyst

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2009

Transaction ID: SA11AI.4197

Amount of Each Receipt this Period
500.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Ms Joan Shalov

Mailing Address 737 Park Avenue
Apt.16E

City State Zip Code
New York NY 10021

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 05 / 2009

Transaction ID: SA11AI.4277

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 82 Irving Place

City State Zip Code
New York NY 10003

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 20 / 2009

Transaction ID: SA11AI.4367

Amount of Each Receipt this Period
1500.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **6800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Hyonwoo Shin

Mailing Address 47 Weed Street

City State Zip Code
New Canaan CT 06840

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

Name of Employer Self Employed Occupation
Self Employed Investment Banker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4214

Amount of Each Receipt this Period
1000.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Richard J Shinder

Mailing Address 21 S. End Avenue
Apt.340

City State Zip Code
New York NY 10280

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

Name of Employer Occupation
Perella Weinberg Partners Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2009

Transaction ID: SA11AI.4318

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 202 Fairmount Road

City State Zip Code
Ridgewood NJ 07450

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

Name of Employer Self-Employed Occupation
Self-Employed Investor

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4344

Amount of Each Receipt this Period
4800.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **10600.00**

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

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

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

FOR LINE NUMBER: PAGE 36 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. David Skatoff

Mailing Address 6 Loretta Court

City State Zip Code
Westport CT 06880

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

Name of Employer Skatoff & Company LLC Occupation Finance

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 21 / 2009

Transaction ID: SA11AI.4359

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 12 Hillcrest Lane

City State Zip Code
Old Greenwich CT 06870

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

Name of Employer Perella Weinberg Partners Occupation Partner

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-General Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 05 / 2009

Transaction ID: SA11AI.4320

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 12 Hillcrest Lane

City State Zip Code
Old Greenwich CT 06870

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

Name of Employer Perella Weinberg Partners Occupation Partner

Receipt For: 2009
 Primary General
 Other (specify) ▼
 Special-Primary Election Cycle-to-Date ▼ 9600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 09 / 2009

Transaction ID: SA11AI.4319

Amount of Each Receipt this Period
4800.00

Ind. contr.

SUBTOTAL of Receipts This Page (optional) ► **14400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Mark R Somerstein

Mailing Address 151 E. 31st Street
Apt.10-A

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
Ropes & Grey Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 05 / 2009

Transaction ID: SA11AI.4321

Amount of Each Receipt this Period
4800.00

Ind. Contr.

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

Mailing Address 3535 Loyola Court

City State Zip Code
Dunkirk MD 20754

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

Name of Employer Occupation
Perella Weinberg Partners Managing Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4322

Amount of Each Receipt this Period
4800.00

Ind. Contr.

C. Full Name (Last, First, Middle Initial)
Mr. Lloyd Sprung

Mailing Address 36 Mooreland Rd

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
Miller Buckfire & Co. LLC Investment Banker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Special-Primary 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2009

Transaction ID: SA11AI.4346

Amount of Each Receipt this Period
2000.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **11600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 94

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Mark Stewart

Mailing Address 201 N. 30th Street

City State Zip Code
Camp Hill PA 17011

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

Name of Employer
Eckert Seamans Cherin & Mellot

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2009

Transaction ID: SA11AI.4372

Amount of Each Receipt this Period

500.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Mr. James Tecce

Mailing Address 80 Park Avenue
Apt.16JK

City State Zip Code
New York NY 10016

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

Name of Employer
Quinn Emanuel Urquhart Ol-
iver

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 08 / 2009

Transaction ID: SA11AI.4171

Amount of Each Receipt this Period

2400.00

Ind. Contribution

C.

Full Name (Last, First, Middle Initial)
Mr. Edward Ughetta

Mailing Address 2 Larchwood Road

City State Zip Code
Larchmont NY 10538

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

Name of Employer
Fried Frank

Occupation
Attorney

Receipt For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Election Cycle-to-Date ▼
2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 08 / 2009

Transaction ID: SA11AI.4172

Amount of Each Receipt this Period

2400.00

Ind. Contribution

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

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

Mailing Address 82 Beechwood Drive

City State Zip Code
Shewsbury NJ 07702

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

Name of Employer Occupation
White & Case LLP Attorney

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special-Primary 2009.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4185

Amount of Each Receipt this Period
2000.00

Ind. Contr.

B. Full Name (Last, First, Middle Initial)
Mr. Chad Valerio

Mailing Address 39 East 29th Street
Apt. 9D

City State Zip Code
New York NY 10016

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

Name of Employer Occupation
Deutsche Bank Analyst

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special-Primary 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2009

Transaction ID: SA11AI.4207

Amount of Each Receipt this Period
500.00

Ind. Contr.

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

Mailing Address One Columbia Place
Apt.S12F

City State Zip Code
New York NY 10019

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

Name of Employer Occupation
Deutsche Bank Finance

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special-Primary 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 22 / 2009

Transaction ID: SA11AI.4351

Amount of Each Receipt this Period
2000.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 94
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Michael Wartell	Date of Receipt MM / DD / YYYY 07 / 15 / 2009
	Mailing Address 180 W 20th Street #phh	Transaction ID: SA11AI.4213
	City State Zip Code New York NY 10011	Amount of Each Receipt this Period 4800.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Venor Capital Occupation Portfolio Manager Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 4800.00	

B.	Full Name (Last, First, Middle Initial) Mr. Edward Weisfelner	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 555 West 59th Street Unit 3A	Transaction ID: SA11AI.4258
	City State Zip Code New York NY 10019	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Brown Rudnick LLP Occupation Lawyer Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Richard I. Werder, Jr.	Date of Receipt MM / DD / YYYY 07 / 01 / 2009
	Mailing Address 61 Church Lane	Transaction ID: SA11AI.4254
	City State Zip Code Scarsdale NY 10583	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Ind. Contr.
	Name of Employer Quinn Emmanuel Urquhard LLP Occupation Lawyer Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	8200.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 41 / 94

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Robert J White

Mailing Address 49 Parkway Drive

City State Zip Code
Rye NY 10580

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

Name of Employer Occupation
Jeffreys & Company Inc. Director

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
 Special-Primary

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 03 / 2009

Transaction ID: SA11AI.4281

Amount of Each Receipt this Period

4800.00

Ind. Contr.

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony A Yoseloff

Mailing Address 15 Central Park West
Apt.34D

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Davidson Newhard Kempner Cap. Money Manager

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
 Special-Primary

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 05 / 2009

Transaction ID: SA11AI.4269

Amount of Each Receipt this Period

2400.00

Ind. Contr.

C.

Full Name (Last, First, Middle Initial)
Nanar N Yoseloff

Mailing Address 15 Central Park West
Apt 34D

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2009 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
 Special-Primary

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 05 / 2009

Transaction ID: SA11AI.4270

Amount of Each Receipt this Period

2400.00

Ind. Contr.

SUBTOTAL of Receipts This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 42 / 94	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Ms Pamela D Zilly		Date of Receipt																					
	Mailing Address 3 East 77th Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7		1	5		2	0	0	9														
	City	State	Zip Code	Transaction ID: SA11AI.4313																				
New York	NY	10021	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<input type="text" value="1000.00"/>																					
Name of Employer Blackstone Group		Occupation Sr. Managing Director		Ind. Contr.																				
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary		Election Cycle-to-Date ▼ <input type="text" value="1000.00"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="284550.00"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
BQE, Inc.

Transaction ID: SB17.4387
Date of Disbursement

Mailing Address 99 Pine Street
Suite 104

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	9

City Albany State NY Zip Code 12207

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Field Director - June 2009

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
BQE, Inc.

Transaction ID: SB17.4388
Date of Disbursement

Mailing Address 99 Pine Street
Suite 104

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	9

City Albany State NY Zip Code 12207

Amount of Each Disbursement this Period

7500.00

Purpose of Disbursement
Field Director July 2009

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
BQE, Inc.

Transaction ID: SB17.4412
Date of Disbursement

Mailing Address 99 Pine Street
Suite 104

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Albany State NY Zip Code 12207

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Field Director

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

--

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BQE, Inc.</p> <p>Mailing Address 99 Pine Street Suite 104</p> <p>City Albany State NY Zip Code 12207</p> <p>Purpose of Disbursement Reimbursement for travel expenses</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4413</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>002 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Caddis Consulting</p> <p>Mailing Address 911 Central Avenue #162</p> <p>City Albany State NY Zip Code 12206</p> <p>Purpose of Disbursement Regional Campaign Advisor June & July 2009</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4399</p> <p>Date of Disbursement 07 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 6250.00</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Cordo & Company LLC</p> <p>Mailing Address 90 State Street Suite 1507</p> <p>City Albany State NY Zip Code 12207</p> <p>Purpose of Disbursement Reimbursement of travel expenses</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4398</p> <p>Date of Disbursement 07 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1681.58</p> <p>002 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9231.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Custom Graphics LLC <hr/> Mailing Address 1409 Route 146 <hr/> City Rexford State NY Zip Code 12148 <hr/> Purpose of Disbursement Printing - Mailing cards Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4401 Date of Disbursement 07 / 23 / 2009 <hr/> Amount of Each Disbursement this Period 738.09
B.	Full Name (Last, First, Middle Initial) Gallagher Hollenbeck LLC <hr/> Mailing Address 171 Madison Street <hr/> City Wood Ridge State NJ Zip Code 07075 <hr/> Purpose of Disbursement Research & Analysis Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4386 Date of Disbursement 07 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 3650.00
C.	Full Name (Last, First, Middle Initial) HSBC Bank USA, N.A. <hr/> Mailing Address 30 South Pearl St. <hr/> City Albany State NY Zip Code 12207 <hr/> Purpose of Disbursement Bank fees Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4615 Date of Disbursement 09 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 15.00

SUBTOTAL of Disbursements This Page (optional) ▶

4403.09

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
HSBC Bank USA, N.A.

Transaction ID: SB17.4617
Date of Disbursement

Mailing Address 30 South Pearl St.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	9

City Albany State NY Zip Code 12207

Amount of Each Disbursement this Period

Purpose of Disbursement
Bank - 2 stop payment fees

001
Category/ Type

60.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Law Office of James Walsh

Transaction ID: SB17.4418
Date of Disbursement

Mailing Address 514 State Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	9

City Schenectady State NY Zip Code 12305

Amount of Each Disbursement this Period

Purpose of Disbursement
Campaign Legal Services

001
Category/ Type

5000.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
New Media Strategies, Inc.

Transaction ID: SB17.4408
Date of Disbursement

Mailing Address 1100 Wilson Blvd
Ste 1400

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	9

City Arlington State VA Zip Code 22209

Amount of Each Disbursement this Period

Purpose of Disbursement
Website Management

001
Category/ Type

15000.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

20060.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) NGPC, LLC		Transaction ID: SB17.4411	
	Mailing Address 90 State Street Suite 1507		Date of Disbursement 07 / 20 / 2009	
City Albany		State NY	Zip Code 12207	
Purpose of Disbursement Legal Services		001		Amount of Each Disbursement this Period 5000.00
Candidate Name Doheny for Congress		Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: NY District: 23		Special-Primary		

B.	Full Name (Last, First, Middle Initial) NGPC, LLC		Transaction ID: SB17.4414	
	Mailing Address 90 State Street Suite 1507		Date of Disbursement 07 / 30 / 2009	
City Albany		State NY	Zip Code 12207	
Purpose of Disbursement Legal Services		001		Amount of Each Disbursement this Period 20000.00
Candidate Name Doheny for Congress		Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: NY District: 23		Special-Primary		

C.	Full Name (Last, First, Middle Initial) NGPC, LLC		Transaction ID: SB17.4415	
	Mailing Address 90 State Street Suite 1507		Date of Disbursement 07 / 30 / 2009	
City Albany		State NY	Zip Code 12207	
Purpose of Disbursement Reimbursement - travel expenses		002		Amount of Each Disbursement this Period 1500.00
Candidate Name Doheny for Congress		Category/ Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: NY District: 23		Special-Primary		

SUBTOTAL of Disbursements This Page (optional)	▶	26500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) OK Office Products Mailing Address 90 State Street City Albany State NY Zip Code 12207 Purpose of Disbursement Mailing Printing Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4400 Date of Disbursement 07 / 23 / 2009
	Amount of Each Disbursement this Period 717.66 Category/Type: 006

B. Full Name (Last, First, Middle Initial) Public Opinion Strategies Mailing Address 214 N. Fayette Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement Survey of 400 likely voters in NY CD23 Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4385 Date of Disbursement 07 / 09 / 2009
	Amount of Each Disbursement this Period 20000.00 Category/Type: 005

C. Full Name (Last, First, Middle Initial) Rivera Driscoll & Carey, LLP Mailing Address 79 Columbia Street City Albany State NY Zip Code 12210 Purpose of Disbursement Legal Services Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4419 Date of Disbursement 07 / 09 / 2009
	Amount of Each Disbursement this Period 20000.00 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶	40717.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 / 94

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.4404
Date of Disbursement

Mailing Address 14471 County Route 145

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	9

City State Zip Code
Sackets Harbor NY 13685

Amount of Each Disbursement this Period

853.02

Purpose of Disbursement
Reimbursement for office setup expenses

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Best Buy

Transaction ID: SB17.4404.1
Date of Disbursement

Mailing Address Store # 1089

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

353.39

Purpose of Disbursement
Digital Camera

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Best Buy

Transaction ID: SB17.4404.2
Date of Disbursement

Mailing Address Store # 1089

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	0	9

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

261.81

Purpose of Disbursement
Fax machine

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

853.02

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <hr/> <p>Mailing Address 14471 County Route 145</p> <hr/> <p>City Sackets Harbor State NY Zip Code 13685</p> <hr/> <p>Purpose of Disbursement Director of Administrative Service</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4405</p> <p>Date of Disbursement 07 / 16 / 2009</p> <hr/> <p>Amount of Each Disbursement this Period 2000.00</p> <hr/> <p>Category/Type 001</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <hr/> <p>Mailing Address 14471 County Route 145</p> <hr/> <p>City Sackets Harbor State NY Zip Code 13685</p> <hr/> <p>Purpose of Disbursement Reimbursement for travel expenses</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4403</p> <p>Date of Disbursement 07 / 23 / 2009</p> <hr/> <p>Amount of Each Disbursement this Period 593.65</p> <hr/> <p>Category/Type 002</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <hr/> <p>Mailing Address 1283 Arsenal Street</p> <hr/> <p>City Watertown State NY Zip Code 13601</p> <hr/> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4403.5</p> <p>Date of Disbursement 07 / 16 / 2009</p> <hr/> <p>Amount of Each Disbursement this Period 52.77</p> <hr/> <p>Category/Type 001</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2593.65

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Transaction ID: SB17.4403.6
Date of Disbursement

Mailing Address 1283 Arsenal Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	9	

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

37.30

Purpose of Disbursement
Office supplies

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: NY District: 23
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Price Chopper

Transaction ID: SB17.4403.7
Date of Disbursement

Mailing Address 1283 Arsenal St

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	9	

City State Zip Code
Watertown NY 13601

Amount of Each Disbursement this Period

97.54

Purpose of Disbursement
Food & Beverage

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: NY District: 23
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Ms Julia C Robbins

Transaction ID: SB17.4406
Date of Disbursement

Mailing Address 14471 County Route 145

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	9	

City State Zip Code
Sackets Harbor NY 13685

Amount of Each Disbursement this Period

4500.00

Purpose of Disbursement
Director of Administrative Service and bonus

001

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: NY District: 23
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Ms Julia C Robbins</p> <p>Mailing Address 14471 County Route 145</p> <p>City Sackets Harbor State NY Zip Code 13685</p> <p>Purpose of Disbursement Reimbursement of office supplies</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4410 Date of Disbursement: 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 398.04</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Nelson Dry Cleaners</p> <p>Mailing Address 1171 Coffeen Street</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Dry Cleaning</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4410.10 Date of Disbursement: 07 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 45.00</p> <p>[MEMO ITEM]</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sage Payment Solutions Division</p> <p>Mailing Address 1750 Old Meadow Road Suite 300</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Bank online fees</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4618 Date of Disbursement: 07 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 8064.00</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8462.04

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division Mailing Address 1750 Old Meadow Road Suite 300 City McLean State VA Zip Code 22102 Purpose of Disbursement Merchant Fees Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4613 Date of Disbursement 08 / 04 / 2009 Amount of Each Disbursement this Period 25.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Sage Payment Solutions Division Mailing Address 1750 Old Meadow Road Suite 300 City McLean State VA Zip Code 22102 Purpose of Disbursement Merchant Fees Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4616 Date of Disbursement 09 / 02 / 2009 Amount of Each Disbursement this Period 25.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) The Coughlin Printing Group Mailing Address 144 Main Avenue City Watertown State NY Zip Code 13601 Purpose of Disbursement Mailing - postage Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB17.4609 Date of Disbursement 07 / 16 / 2009 Amount of Each Disbursement this Period 637.56 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	687.56
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) The Coughlin Printing Group</p> <p>Mailing Address 144 Main Avenue</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Printing - Meeting Cards, Brochures</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4402</p> <p>Date of Disbursement 07 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2324.20</p> <p>006 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) The Coughlin Printing Group</p> <p>Mailing Address 144 Main Avenue</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement Printing - letterhead, envelopes</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4409</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1077.28</p> <p>006 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US Post Office</p> <p>Mailing Address 45 Hudson Avenue</p> <p>City Albany State NY Zip Code 12207</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB17.4424</p> <p>Date of Disbursement 07 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 880.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4281.48

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 / 94

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Nick Vaughn

Mailing Address 629 Patterson Street

City Ogdensburg State NY Zip Code 13669

Purpose of Disbursement
Transportation Director

001
Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Transaction ID: SB17.4420
Date of Disbursement

07 / 30 / 2009

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Graham Wise

Mailing Address 776 S. Massey Street

City Watertown State NY Zip Code 13601

Purpose of Disbursement
Campaign Mgr

001
Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Transaction ID: SB17.4407
Date of Disbursement

07 / 23 / 2009

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

164790.08

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Marc Abrams</p> <p>Mailing Address 787 7th Avenue</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4427</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Matthew Adler</p> <p>Mailing Address 4012 Sunnyside Avenue North</p> <p>City Seattle State WA Zip Code 98103</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4428</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Appel Associates LLC</p> <p>Mailing Address 22 Brae Burn Drive</p> <p>City Purchase State NY Zip Code 10577</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4429</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10100.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Joanne Bane	Transaction ID: SB20A.4430 Date of Disbursement 07 / 30 / 2009
	Mailing Address 60 Lawrence Avenue	Amount of Each Disbursement this Period 4800.00
	City Lawrence State NY Zip Code 11559	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
B.	Full Name (Last, First, Middle Initial) Mr. Mark I Bane	Transaction ID: SB20A.4431 Date of Disbursement 07 / 30 / 2009
	Mailing Address 60 Lawrence Avenue	Amount of Each Disbursement this Period 4800.00
	City Lawrence State NY Zip Code 11559	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
C.	Full Name (Last, First, Middle Initial) Mr. David Bernstein	Transaction ID: SB20A.4433 Date of Disbursement 07 / 30 / 2009
	Mailing Address 19333 Collins Avenue	Amount of Each Disbursement this Period 2500.00
	City Sunny Isles Beach State FL Zip Code 33160	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

SUBTOTAL of Disbursements This Page (optional) ▶

12100.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Raj Bhattacharyya

Transaction ID: SB20A.4434
Date of Disbursement

Mailing Address 10 East End Avenue
#9M

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10075

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Allan Bloom

Transaction ID: SB20A.4435
Date of Disbursement

Mailing Address 115 Poplar Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Roslyn NY 11576

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Scott Bok

Transaction ID: SB20A.4436
Date of Disbursement

Mailing Address 48 Twin Lakes Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Salisbury CT 06068

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

9200.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Mr. John Brecker <hr/> Mailing Address 111 Garden Road <hr/> City Scarsdale State NY Zip Code 10583 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4437 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 4800.00 Category/Type: 010
B. Full Name (Last, First, Middle Initial) Mr. Jeffrey Brodsky <hr/> Mailing Address 414 Sterling Road <hr/> City Harrison State NY Zip Code 10528 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4440 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 4800.00 Category/Type: 010
C. Full Name (Last, First, Middle Initial) Mrs. Lori Brodsky <hr/> Mailing Address 414 Sterling Road <hr/> City Harrison State NY Zip Code 10528 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4441 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 4800.00 Category/Type: 010

SUBTOTAL of Disbursements This Page (optional)	▶	14400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Mr. Jeffrey Buckalew <hr/> Mailing Address 150 East 69th Street Apt. 5DE <hr/> City New York State NY Zip Code 10021 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4444 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
	Category/Type 010
B. Full Name (Last, First, Middle Initial) Mr. Alan Carr <hr/> Mailing Address 166 East 61st Street Apt. 4N <hr/> City New York State NY Zip Code 10065 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4447 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 2400.00
	Category/Type 010
C. Full Name (Last, First, Middle Initial) Harlan Cherniak <hr/> Mailing Address 5 East 22nd Street Apt 9F <hr/> City New York State NY Zip Code 10010 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4448 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
	Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

3400.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Kevin Cofsky Mailing Address 7 O'Reilly Court City Croton on Hudson State NY Zip Code 10520 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4449 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 1000.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Mr. Peter Corbell Mailing Address 1849 Valley Park Avenue City Hermosa Beach State CA Zip Code 90254 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4450 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 1200.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Mr. Michael Curreri Mailing Address 245 E 21st Street Apt. 12-A City New York State NY Zip Code 10010 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4451 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 4800.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Hilty David</p> <p>Mailing Address 388 West Broadway Apt.5</p> <p>City New York State NY Zip Code 10012</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4452</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Harrison Lane Denman</p> <p>Mailing Address 51 Madison Avenue 22nd floor</p> <p>City New York State NY Zip Code 10010</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4454</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Christopher Donoho</p> <p>Mailing Address 28 Union Hill Road</p> <p>City Madison State NJ Zip Code 07940</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4456</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5450.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mrs Cathy Dougherty	Transaction ID: SB20A.4457 Date of Disbursement 07 / 30 / 2009
	Mailing Address 1160 Park Avenue Apt.8D	Amount of Each Disbursement this Period 2400.00
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
B.	Full Name (Last, First, Middle Initial) Mr. John Dougherty	Transaction ID: SB20A.4458 Date of Disbursement 07 / 30 / 2009
	Mailing Address 1160 Park Avenue Apt.8D	Amount of Each Disbursement this Period 2400.00
	City New York State NY Zip Code 10128	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
C.	Full Name (Last, First, Middle Initial) Mr. Dennis F Dunne	Transaction ID: SB20A.4459 Date of Disbursement 07 / 30 / 2009
	Mailing Address 4 Valley Road	Amount of Each Disbursement this Period 4800.00
	City Scarsdale State NY Zip Code 10583	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

SUBTOTAL of Disbursements This Page (optional)	▶	9600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Timothy Dwyer</p> <p>Mailing Address 60 Beacon Hill Lane</p> <p>City New Canaan State CT Zip Code 06840</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4460</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Joshua W Easterly</p> <p>Mailing Address 168 5th Avenue Apt.402</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4461</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1200.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. David Elsberg</p> <p>Mailing Address 240 W. 98th Street Apt.10B</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4462</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4600.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 94

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Gerald M Esposito</p> <p>Mailing Address 43 Bunker Lane</p> <p>City Hicksville State NY Zip Code 11801</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4463</p> <p>Date of Disbursement MM / DD / YYYY 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. John C Esposito</p> <p>Mailing Address 546 Highland Avenue</p> <p>City Ridgewood State NJ Zip Code 07450</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4464</p> <p>Date of Disbursement MM / DD / YYYY 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Shawn Faurot</p> <p>Mailing Address 756 Washington Street Apt. 3D</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4465</p> <p>Date of Disbursement MM / DD / YYYY 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mr. Ben Finestone</p> <p>Mailing Address 666 Greenwich Street #849</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4466</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>010 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. Evan Flaschen</p> <p>Mailing Address 242 Hubbard Street</p> <p>City Glastonbury State CT Zip Code 06033</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4467</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Avram Friedman</p> <p>Mailing Address 845 West End Avenue Apt. 15E</p> <p>City New York State NY Zip Code 10025</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4469</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7600.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Philip Giordano	Transaction ID: SB20A.4471 Date of Disbursement 07 / 30 / 2009
	Mailing Address 2392 Hawthorne Drive	Amount of Each Disbursement this Period 1200.00
	City Yorktown Heights State NY Zip Code 10598	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

B.	Full Name (Last, First, Middle Initial) Mr. Robert Greenhill	Transaction ID: SB20A.4472 Date of Disbursement 07 / 30 / 2009
	Mailing Address 433 Riversville Road	Amount of Each Disbursement this Period 500.00
	City Greenwich State CT Zip Code 06831	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Grubb	Transaction ID: SB20A.4474 Date of Disbursement 07 / 30 / 2009
	Mailing Address 279 East 44th Street Apt. 20E	Amount of Each Disbursement this Period 500.00
	City New York State NY Zip Code 10017	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress	010 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

SUBTOTAL of Disbursements This Page (optional)	2200.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel Guyder

Transaction ID: SB20A.4475
Date of Disbursement

Mailing Address 76 Willetts Road

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Mount Kisko NY 10549

Amount of Each Disbursement this Period

750.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Jonathan Harris

Transaction ID: SB20A.4476
Date of Disbursement

Mailing Address 200 East 71st Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10021

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Henkin

Transaction ID: SB20A.4477
Date of Disbursement

Mailing Address 330 August Circle

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Menlo Park CA 94025

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Jesse Hibbard

Transaction ID: SB20A.4478
Date of Disbursement

Mailing Address 3804 Wentwood Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Dallas State TX Zip Code 75225

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

2400.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Matthew Hirschfield

Transaction ID: SB20A.4479
Date of Disbursement

Mailing Address 66 Spring Court

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Muttontown State NY Zip Code 11791

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

500.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Ms Kimberly D Huffard

Transaction ID: SB20A.4481
Date of Disbursement

Mailing Address 138 Manfield Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Darien State CT Zip Code 06820

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

1000.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Dan Kamensky

Transaction ID: SB20A.4482
Date of Disbursement

Mailing Address 11 Greenway

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Roslyn State NY Zip Code 11576

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement Refund

010

Category/Type

Candidate Name Doheny for Congress

Office Sought: House Senate President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Eric Kaup

Transaction ID: SB20A.4483
Date of Disbursement

Mailing Address 117 3rd Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Wilmette State IL Zip Code 60091

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement Refund

010

Category/Type

Candidate Name Doheny for Congress

Office Sought: House Senate President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Kevin Kavanagh

Transaction ID: SB20A.4484
Date of Disbursement

Mailing Address 115 Drake Smith Lane

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Rye State NY Zip Code 10580

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement Refund

010

Category/Type

Candidate Name Doheny for Congress

Office Sought: House Senate President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

10600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Thomas Kempner</p> <p>Mailing Address 65 East 55th Street floor 19</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4485 Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Sapina Kirpalani</p> <p>Mailing Address 27 Chauncey Place</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General</p>	<p>Transaction ID: SB20A.4486 Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Susheel Kirpalani</p> <p>Mailing Address 27 Chauncey Place</p> <p>City Woodbury State NY Zip Code 11797</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General</p>	<p>Transaction ID: SB20A.4487 Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9600.00

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

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

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Susheel & Sapina Kirpalani Mailing Address 27 Chauncey Place City Woodbury State NY Zip Code 11797 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4488 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 4800.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) Mr. Shervin J Korangy Mailing Address 40 E. 94th Street Apt.16CD City New York State NY Zip Code 10128 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4490 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 500.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) Mr. Stuart Kovensky Mailing Address 18 Long Pond Road City Armon State NY Zip Code 10504 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4491 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 250.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

5550.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

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

Transaction ID: SB20A.4492
Date of Disbursement

Mailing Address 1247 Oenoke Ridge

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New Canaan CT 06840

Amount of Each Disbursement this Period

9600.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel Krueger

Transaction ID: SB20A.4493
Date of Disbursement

Mailing Address 260 Park Avenue, Apt 6-I

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10010

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Ms Lauren Krueger

Transaction ID: SB20A.4494
Date of Disbursement

Mailing Address 260 Park Avenue, Apt 6-I

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10010

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

14600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Mayur Lakhani</p> <p>Mailing Address 201 E 86th Street Apt.6C</p> <p>City New York State NY Zip Code 10028</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4495</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Keshav Lall</p> <p>Mailing Address 235 E 40 Street Apt.38D</p> <p>City New York State NY Zip Code 10016</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4496</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1200.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Thomas Lauria</p> <p>Mailing Address 200 South Biscayne Blvd Suite 4900</p> <p>City Miami State FL Zip Code 33131</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4497</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

10800.00

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

Use separate schedule(s)
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PAGE 75 / 94

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Michael J Leffell Mailing Address 35 Shel Drake Road City Scarsdale State NY Zip Code 10583 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4498 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2400.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Mr. Zachary Levenick Mailing Address 639 Hudson Street City New York State NY Zip Code 10014 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4500 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 1000.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Mr. Zachary Lewis Mailing Address 142 E. 33rd St Apt. 6E City New York State NY Zip Code 10016 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4501 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2400.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5800.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Barbara Lyne</p> <p>Mailing Address 25 East End Avenue Apt. 11E</p> <p>City New York State NY Zip Code 10028</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4502</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>010 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mr. James H MacInnis</p> <p>Mailing Address 105 W 13th Street Apt 7E</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4503</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Keith Markel</p> <p>Mailing Address 150 Nassau Street Apt. 3E</p> <p>City New York State NY Zip Code 10038</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4504</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3650.00

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

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(check only one)

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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. James C McCarroll</p> <p>Mailing Address 599 Lexington Avenue</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4506</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Hugh McDonald</p> <p>Mailing Address 21 Balfour Lane</p> <p>City Ramsey State NJ Zip Code 07446</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4507</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Amy Merchant</p> <p>Mailing Address 7 Beechwood Lane</p> <p>City Scarsdale State NY Zip Code 10583</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4508</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>

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5800.00

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

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<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Mr. George Mesires <hr/> Mailing Address 200 W. Madison Street Suite 3900 <hr/> City Chicago State IL Zip Code 60606 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4509 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
	Category/Type 010
B. Full Name (Last, First, Middle Initial) Mr. Andrew Milgram <hr/> Mailing Address 31 Hillside Drive <hr/> City Greenwich State CT Zip Code 06830 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4510 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 2400.00
	Category/Type 010
C. Full Name (Last, First, Middle Initial) Mr. Josh Miller <hr/> Mailing Address 50 West 96th Street Apt. 12C <hr/> City New York State NY Zip Code 10025 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4511 Date of Disbursement 07 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 4800.00
	Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

7450.00

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Joe Minias</p> <p>Mailing Address 22 River Terrace Apt.27H</p> <p>City New York State NY Zip Code 10282</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4512</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Shannon Lowry Nagle</p> <p>Mailing Address 2166 Broadway #4F</p> <p>City New York State NY Zip Code 10024</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4513</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Ms Rebecca Parekh</p> <p>Mailing Address 75 Bank Street Apt. 6K</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4514</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/ Type</p>

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3400.00

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

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A. Full Name (Last, First, Middle Initial) Mr. Thomas Pease <hr/> Mailing Address 1561 Stevenson Road <hr/> City Hewlett State NY Zip Code 11557 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4517 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1200.00
	Category/ Type 010
B. Full Name (Last, First, Middle Initial) Mr. Alexander R Perez <hr/> Mailing Address 445 Grand Bay Drive Apt.317 <hr/> City Key Biscane State FL Zip Code 33149 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4519 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 2400.00
	Category/ Type 010
C. Full Name (Last, First, Middle Initial) Mr. Jason Lee Perri <hr/> Mailing Address 1 Morton Avenue Apt.3AE <hr/> City New York State NY Zip Code 10014 <hr/> Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4520 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/ Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

4100.00

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

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Detailed Summary Page

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(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Kevin W Phillips Mailing Address 111 W 67th Street 35-D City New York State NY Zip Code 10023 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4521 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 500.00 Category/Type 010
B.	Full Name (Last, First, Middle Initial) Mr. Christopher Provost Mailing Address 3741 Purdeu Ave City Dallas State TX Zip Code 75225 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4524 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 3000.00 Category/Type 010
C.	Full Name (Last, First, Middle Initial) Ms Karen Putnam Mailing Address 160 Riverside Blvd Apt.15H City New York State NY Zip Code 10069 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4525 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2300.00 Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶

5800.00

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

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Kevin Reed</p> <p>Mailing Address 42 Clarement Road</p> <p>City Scarsdale State NY Zip Code 10583</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4527</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Bradley A Robins</p> <p>Mailing Address 151 E 83rd Street Apt.6A</p> <p>City New York State NY Zip Code 10028</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4529</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mrs. Elizabeth Robins</p> <p>Mailing Address 151 East 83rd Street</p> <p>City New York State NY Zip Code 10028</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4530</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4800.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9850.00

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. William Robins Mailing Address 715 Baker Street City San Francisco State CA Zip Code 94115 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4531 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 250.00 010 Category/Type
B.	Full Name (Last, First, Middle Initial) Mr. Eric Rosenfeld Mailing Address 1 Osborn Road City Harrison State NY Zip Code 10528 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4532 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2400.00 010 Category/Type
C.	Full Name (Last, First, Middle Initial) Megan Schatz Mailing Address 344 West 72nd Street Apt.9I City New York State NY Zip Code 10023 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4534 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2400.00 010 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

5050.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. William Schatz

Transaction ID: SB20A.4535
Date of Disbursement

Mailing Address 344 West 72nd Street
Apt. 9l

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10023

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. William Schatz

Transaction ID: SB20A.4536
Date of Disbursement

Mailing Address 344 West 72nd Street
Apt. 9l

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10023

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-General

C.

Full Name (Last, First, Middle Initial)
Mr. Robert A Schmitz

Transaction ID: SB20A.4537
Date of Disbursement

Mailing Address 34 Seville Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Rye NY 10580

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Scott

Transaction ID: SB20A.4538
Date of Disbursement

Mailing Address 255 Hudson Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10013

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

500.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Ms Joan Shalov

Transaction ID: SB20A.4539
Date of Disbursement

Mailing Address 737 Park Avenue
Apt. 16E

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10021

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

4800.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
D Shapiro

Transaction ID: SB20A.4540
Date of Disbursement

Mailing Address 82 Irving Place

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10003

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

1500.00

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

6800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Hyonwoo Shin

Transaction ID: SB20A.4541
Date of Disbursement

Mailing Address 47 Weed Street

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New Canaan CT 06840

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Richard J Shinder

Transaction ID: SB20A.4543
Date of Disbursement

Mailing Address 21 S. End Avenue
Apt.340

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
New York NY 10280

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
John Shippee

Transaction ID: SB20A.4544
Date of Disbursement

Mailing Address 202 Fairmount Road

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City State Zip Code
Ridgewood NJ 07450

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010

Category/
Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

10600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. David Skatoff	Transaction ID: SB20A.4545 Date of Disbursement 07 / 30 / 2009
	Mailing Address 6 Loretta Court	Amount of Each Disbursement this Period 4800.00
	City Westport State CT Zip Code 06880	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Derron Slonecker	Transaction ID: SB20A.4547 Date of Disbursement 07 / 30 / 2009
	Mailing Address 12 Hillcrest Lane	Amount of Each Disbursement this Period 4800.00
	City Old Greenwich State CT Zip Code 06870	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Derron Slonecker	Transaction ID: SB20A.4548 Date of Disbursement 07 / 30 / 2009
	Mailing Address 12 Hillcrest Lane	Amount of Each Disbursement this Period 4800.00
	City Old Greenwich State CT Zip Code 06870	
	Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	010 Category/ Type

SUBTOTAL of Disbursements This Page (optional)

14400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 94

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Mark R Somerstein

Transaction ID: SB20A.4550
Date of Disbursement

Mailing Address 151 E. 31st Street
Apt.10-A

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City New York State NY Zip Code 10016

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
John Spencer

Transaction ID: SB20A.4551
Date of Disbursement

Mailing Address 3535 Loyola Court

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Dunkirk State MD Zip Code 20754

Amount of Each Disbursement this Period

4800.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Mr. Lloyd Sprung

Transaction ID: SB20A.4552
Date of Disbursement

Mailing Address 36 Mooreland Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Greenwich State CT Zip Code 06831

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Refund

010
Category/ Type

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

11600.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

<p>A. Full Name (Last, First, Middle Initial) Mr. Mark Stewart</p> <p>Mailing Address 201 N. 30th Street</p> <p>City Camp Hill State PA Zip Code 17011</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4553</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>010 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. James Tecce</p> <p>Mailing Address 80 Park Avenue Apt. 16JK</p> <p>City New York State NY Zip Code 10016</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4554</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Edward Ughetta</p> <p>Mailing Address 2 Larchwood Road</p> <p>City Larchmont State NY Zip Code 10538</p> <p>Purpose of Disbursement Refund</p> <p>Candidate Name Doheny for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p>Transaction ID: SB20A.4555</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2400.00</p> <p>010 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5300.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Gerard Uzzi Mailing Address 82 Beechwood Drive City Shewsbury State NJ Zip Code 07702 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4556 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2000.00 010 Category/ Type
B.	Full Name (Last, First, Middle Initial) Mr. Chad Valerio Mailing Address 39 East 29th Street Apt. 9D City New York State NY Zip Code 10016 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4557 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 500.00 010 Category/ Type
C.	Full Name (Last, First, Middle Initial) Ronapol Vichaidith Mailing Address One Columbia Place Apt.S12F City New York State NY Zip Code 10019 Purpose of Disbursement Refund Candidate Name Doheny for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Transaction ID: SB20A.4559 Date of Disbursement 07 / 30 / 2009 Amount of Each Disbursement this Period 2000.00 010 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Michael Wartell	Transaction ID: SB20A.4561 Date of Disbursement 07 / 30 / 2009
	Mailing Address 180 W 20th Street #phh City New York State NY Zip Code 10011	Amount of Each Disbursement this Period 4800.00
Purpose of Disbursement Refund Candidate Name Doheny for Congress		010 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

B.	Full Name (Last, First, Middle Initial) Mr. Edward Weisfelner	Transaction ID: SB20A.4562 Date of Disbursement 07 / 30 / 2009
	Mailing Address 555 West 59th Street Unit 3A City New York State NY Zip Code 10019	Amount of Each Disbursement this Period 2400.00
Purpose of Disbursement Refund Candidate Name Doheny for Congress		010 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

C.	Full Name (Last, First, Middle Initial) Mr. Richard I. Werder, Jr.	Transaction ID: SB20A.4563 Date of Disbursement 07 / 30 / 2009
	Mailing Address 61 Church Lane City Scarsdale State NY Zip Code 10583	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Refund Candidate Name Doheny for Congress		010 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary

SUBTOTAL of Disbursements This Page (optional)	8200.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Robert J White

Transaction ID: SB20A.4564
Date of Disbursement

Mailing Address 49 Parkway Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Rye State NY Zip Code 10580

Amount of Each Disbursement this Period

Purpose of Disbursement Refund

010
Category/ Type

4800.00

Candidate Name Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony A Yoseloff

Transaction ID: SB20A.4565
Date of Disbursement

Mailing Address 15 Central Park West
Apt.34D

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City New York State NY Zip Code 10023

Amount of Each Disbursement this Period

Purpose of Disbursement Refund

010
Category/ Type

2400.00

Candidate Name Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

C.

Full Name (Last, First, Middle Initial)
Nanar N Yoseloff

Transaction ID: SB20A.4566
Date of Disbursement

Mailing Address 15 Central Park West
Apt 34D

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City New York State NY Zip Code 10023

Amount of Each Disbursement this Period

Purpose of Disbursement Refund

010
Category/ Type

2400.00

Candidate Name Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

SUBTOTAL of Disbursements This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 93 / 94

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Doheny for Congress

A.

Full Name (Last, First, Middle Initial)
Ms Pamela D Zilly

Mailing Address 3 East 77th Street

City State Zip Code
New York NY 10021

Purpose of Disbursement
Refund

Candidate Name
Doheny for Congress

Office Sought: House
 Senate
 President
State: NY District: 23

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-Primary

Transaction ID: SB20A.4567
Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	7		3	0		2	0	0	9

Amount of Each Disbursement this Period

1000.00

010
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

284550.00

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
Doheny for Congress

Transaction ID: SC/10.4118

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew Doheny - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary
Mailing Address 303 Paddock Street	
City Watertown State NY ZIP Code 13601	

Original Amount of Loan 500000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YY YY 06 29 2009	Date Due 11/30/2010	Interest Rate 0.0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	------------------------	---------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="500000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="500000.00"/>

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