

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) PETE KING FOR CONGRESS COMMITTEE		Report Covering the Period: From: OCT. 1, 1994 To: OCT. 19, 1994	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		16575.00	
(ii) Unitemized		9454.00	
(iii) Total of contributions from individuals		26029.00	212906.51
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)		18,800.00	111,075.00
(d) The Candidate			
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		44829.00	323,981.51
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			
13. LOANS:			
(a) Made or Guaranteed by the Candidate			
(b) All Other Loans			
(c) TOTAL LOANS (add 13(a) and (b))			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)			
15. OTHER RECEIPTS (Dividends, Interest, etc.)			
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		44829.00	323,981.51
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		97,249.84	179451.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			
(b) Of All Other Loans			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees			2100.00
(b) Political Party Committees			
(c) Other Political Committees (such as PACs)			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))			2100.00
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		97,249.84	181,551.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 279,569.46	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 44,829.00	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 324,398.00	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 97,249.84	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 227,148.16	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7
FOR LINE NUMBER
11A1

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Baim Earl 2578 Peconic Avenue Seaford, NY 11783	Name of Employer Self	Date (month, day, year) 10/11/94	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code Cleary John Cove Woods Road Oyster Bay NY 11771	Name of Employer Farrell, Fritz	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$700.00
C. Full Name, Mailing Address and ZIP Code Eich Doris 3857 Keily Drive Seaford NY 11783	Name of Employer NASSAU COUNTY Bd. of Assessors	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CLERK	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code Farella Rudolph 559 Irving Street Westbury NY 11590	Name of Employer US Dept. Housing	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Const. Analyst	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code Folz Roger 3401 Lawson Boulevard Oceanside NY 11572	Name of Employer self	Date (month, day, year) 10/5/94	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation vending	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code Leiter Stephen 3417 Poplar Street Oceanside NY 11572	Name of Employer East Coast Abstract	Date (month, day, year) 10/17/94	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date > \$	\$700.00
G. Full Name, Mailing Address and ZIP Code Lynch Rosetta 26 Mabel Place Merrick NY 11566	Name of Employer El-Al Isreal Air	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Cargo Agent	Aggregate Year-to-Date > \$	\$220.00

SUBTOTAL of Receipts This Page (optional)

1020.00

TOTAL This Period (last page this line number only)

04-01-1111-1111-1111

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 17
FOR LINE NUMBER 11a1

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code McCabe Thomas 8400 Shore Front Parkway, 9N Rockaway Beach NY 11693 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation <i>retired</i> Aggregate Year-to-Date > \$ <i>\$250.00</i>	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code McKeon Bernard 193-15 Station Road Flushing NY 11359 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation <i>retired</i> Aggregate Year-to-Date > \$ <i>\$450.00</i>	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Miklos Nancy 48 Lindenmere Drive Merrick NY 11566 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nassau County Occupation <i>Deputy County Attorney</i> Aggregate Year-to-Date > \$ <i>\$220.00</i>	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$20.00
D. Full Name, Mailing Address and ZIP Code Schloss Stephen 17 Serenite Lane Muttontown NY 11791 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Leslie Supply Co. Occupation <i>Executive</i> Aggregate Year-to-Date > \$ <i>\$400.00</i>	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code Sinnott Michael 42 Parkview Place Baldwin NY 11510 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Town of Hempstead</i> Occupation <i>INVESTIGATOR</i> Aggregate Year-to-Date > \$ <i>\$250.00</i>	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

4-00145

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 7
FOR LINE NUMBER
1121

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Ahmed Fakhiuddin 11 Mirriellees Circle Great Neck NY 11021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation physician Aggregate Year-to-Date > \$ <u>\$350.00</u>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$350.00
B. Full Name, Mailing Address and ZIP Code Ahmed Mir Manzur 5 Kathy Drive Muttontown NY 11753 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation physician Aggregate Year-to-Date > \$ <u>\$300.00</u>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and ZIP Code Amin Irfan 32 Brussel Drive New Hyde Park NY 11040 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation physician Aggregate Year-to-Date > \$ <u>\$350.00</u>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$350.00
D. Full Name, Mailing Address and ZIP Code Bartol Ernest 211 Cold Spring Road Syosset NY 11791 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ <u>\$250.00</u>	Date (month, day, year) 10/11/94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Cacciano Carol 48 Sugar Maple Lane Glen Cove NY 11542 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NC Federation of Rep. Women Occupation President Aggregate Year-to-Date > \$ <u>\$250.00</u>	Date (month, day, year) 10//17/9	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and ZIP Code Dam Naim 125 Coachman Place West Muttontown NY 11791 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cosemse, Inc. Occupation manager Aggregate Year-to-Date > \$ <u>\$300.00</u>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
G. Full Name, Mailing Address and ZIP Code Gangat Yakub 9 Davids Way Port Jefferson NY 11777 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer YM Gangat <i>self employed</i> Occupation physician Aggregate Year-to-Date > \$ <u>\$335.00</u>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$335.00

SUBTOTAL of Receipts This Page (optional)

2135.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 7
FOR LINE NUMBER 1121

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Gould Fredric 212 Brookville Lane Old Brookville NY 11545	Name of Employer self Occupation attorney	Date (month, day, year) 10/5/94	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Hameed Sultan 10 School Lane Huntington NY 11743	Name of Employer SUNY at Stony Brook Occupation professor	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Haque Izhar 7 Meadow Gate East Head of the Harbor NY 11780	Name of Employer self Occupation MD	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
D. Full Name, Mailing Address and ZIP Code Hassani N. 94-11 59th Avenue Elmhurst NY 11373	Name of Employer self Occupation physician	Date (month, day, year) 10/2/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code Hussain Tasawar 71-06 37th Avenue Jackson Heights NY 11372	Name of Employer self Occupation businessman	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Kahn Sirfraz 34 Poplar Place Port Washington NY 11050	Name of Employer Bay County Corp Occupation businessman	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code Kathwari M. Farooq 151 Elk Avenue New Rochelle NY 10804	Name of Employer Ethan Allen Inc. Occupation president	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 5 OF 17
FOR LINE NUMBER 1121

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Kelly Bernard 3 Winthrop Street Islip NY 11751 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Info request</i> Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/13/94	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Khan Abdul 2 Bridle Path Court Muttontown NY 11545 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Interfaith Med Ctr Occupation physician Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$400.00
C. Full Name, Mailing Address and ZIP Code King Joseph 4044 Darby Lane Seaford NY 11783 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Freeport Police Department Occupation police chief Aggregate Year-to-Date > \$ 950.00	Date (month, day, year) 10/17/94	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Longua Lawrence 124 Southard Avenue Rockville Centre NY 11570 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Mitsubishi Trust Occupation Real Estate Finance Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 10/5/94	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Lunat Ebrahim 2 Hunting Hill Road New Hyde Park NY 11040 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation CPA Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and ZIP Code Mir Parvez 17 Townsend Drive Syosset NY 11791 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wyckoff Heights Med Center Occupation physician Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
G. Full Name, Mailing Address and ZIP Code Olney Victor PO Box 98 Madison Square Station NY 10010 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Info request</i> Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/11/94	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 17
FOR LINE NUMBER 11 & 1

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Rasool Ayaz 16 Quaker Ridge Drive Brookville NY 11545 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation MD Aggregate Year-to-Date > \$ 3350.00	Date (month, day, year) 10/3/94 Amount of Each Receipt this Period \$350.00
B. Full Name, Mailing Address and ZIP Code Sarsfield Thomas 466 Greene Avenue Sayville NY 11782 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>J. Request</i> Occupation bond broker Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/5/94 Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and ZIP Code Schnitzer Leonard PO Box 10047 Portland OR 97210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Schnitzer Invest. Corp Occupation executive Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/3/94 Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Schnitzer Gilbert 1975 SW Terrace Drive Portland OR 97201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Schnitzer Invest. Corp Occupation executive Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/3/94 Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Shapiro Janet 18 Wheatley Road Brookville NY 11545 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation housewife Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/1/94 Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Shapiro Philip 18 Old Wheatley Road Brookville NY 11545 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Apex Marine</i> Occupation president - CEO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10/1/94 Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

4650.00

4-00145

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 7
FOR LINE NUMBER
1161

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)

RETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Wenger Bernice Forest Drive Sands Point NY 11050 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation <i>housewife</i> Aggregate Year-to-Date > \$ <i>\$1,000.00</i>	Date (month, day, year) 10/17/94	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Wenger Edward Forest Drive Sands Point NY 11050 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prospective Comput. Analysts Occupation <i>president</i> Aggregate Year-to-Date > \$ <i>\$1,000.00</i>	Date (month, day, year) 10/17/94	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Zaman Qamar 2000 North Village Avenue Rockville Centre NY 11570 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Mercy Medical Ctr.</i> Occupation <i>physician</i> Aggregate Year-to-Date > \$ <i>\$300.00</i>	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

16575.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 115

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code American Collector Asso. PAC 4040 West 70th Street Minneapolis MN 55435	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code American Commercial LinesPAC PO Box 610 Jeffersonville NY 47130	Name of Employer Occupation	Date (month, day, year) 10/5/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code American Crystal Sugar PAC 101 North 3rd Street Moorhead MN 56560	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code American Medical PAC 1101 Vermont Avenue NW Washington DC 20005	Name of Employer Occupation	Date (month, day, year) 10/17/94	Amount of Each Receipt this Period \$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 9,650.00		
E. Full Name, Mailing Address and ZIP Code AT&T PAC 550 Madison Avenue New York NY 10022	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code BANC One PAC 100 East Broad Street Columbus OH 43271	Name of Employer Occupation	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code CBANYS PAC P.O. Box 325 Grant Central Station NY NY 10163	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional)

8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 4
FOR LINE NUMBER 11C

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code
Commodity Futures PAC
30 S. Wacker Drive
Chicago
IL 60606

Name of Employer

Date (month,
day, year)

10/3/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 2,000.00

B. Full Name, Mailing Address and ZIP Code
Credit Union PAC
805 15th Street, NW Ste. 300
Washington
DC 20005

Name of Employer

Date (month,
day, year)

10/12/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

C. Full Name, Mailing Address and ZIP Code
Exxon PAC
P.O. Box 2180
Houston
TX 77001

Name of Employer

Date (month,
day, year)

10/7/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000.00

D. Full Name, Mailing Address and ZIP Code
Fireman's Fund Insurance PAC
777 San Marin Drive
Novato
CA 94945

Name of Employer

Date (month,
day, year)

10/12/94

Amount of Each
Receipt this Period

\$300.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 300.00

E. Full Name, Mailing Address and ZIP Code
First Chicago Corporation
One First National Plaza
Chicago
IL 60670

Name of Employer

Date (month,
day, year)

10/17/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code
Marine Midland BPAC
One Marine Midland Center
Buffalo
NY 14203

Name of Employer

Date (month,
day, year)

10/5/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code
MetLife PAC
1620 L Street, Suite 800 NW
Washington
DC 20036

Name of Employer

Date (month,
day, year)

10/3/94

Amount of Each
Receipt this Period

\$500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,000.00

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 14
FOR LINE NUMBER 115

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Morgan Companies PAC 60 Wall Street New York NY 10260	Name of Employer Occupation	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
B. Full Name, Mailing Address and ZIP Code NARFE PAC 1533 New Hampshire Avenue NW Washington DC 20036	Name of Employer Occupation	Date (month, day, year) 10/18/94	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
C. Full Name, Mailing Address and ZIP Code National Right to Life PAC 419 7th Street, NW, Washington DC 20004	Name of Employer Occupation	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code NYSEG PAC 4500 Vestal Parkway East Binghamton NY 13902	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code PAC National Check Cashiers Asso 1 Mack Centre Dr. Mack Ctr. Paramus NJ 07652	Name of Employer Occupation	Date (month, day, year) 10/12/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Unions PAC Natl Asso of Federal P.O. Box 3769 Washington DC 20007	Name of Employer Credit Occupation	Date (month, day, year) 10/3/94	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code UPSPAC 316 Pennsylvania Avenue SE Washington DC 20003	Name of Employer Occupation	Date (month, day, year) 10/11/94	Amount of Each Receipt this Period \$3,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 14
FOR LINE NUMBER 116

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code
WMX PAC
3003 Butterfield Road
Oak Brook
IL 60521

Name of Employer

Date (month,
day, year)
10/5/94

Amount of Each
Receipt this Period
\$500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

18,800.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 17

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)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code United States Postmaster Hicksville	Purpose of Disbursement postage permit acct. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/7/94 10/11/94 10/14/94	Amount of Each Disbursement This Period 800.00 150.00 13,000.00
B. Full Name, Mailing Address and ZIP Code United States Postmaster North Bellmore, Farmingdale Cannon Building	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/7/94 10/12/94 10/7/94	Amount of Each Disbursement This Period 7.58 2000.00 287.10
C. Full Name, Mailing Address and ZIP Code United States Postmaster Seaford	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/94 10/17/94	Amount of Each Disbursement This Period 87.00 287.10
D. Full Name, Mailing Address and ZIP Code Ecm office Equipment 431 Willis Avenue Williston, Park NY 11596	Purpose of Disbursement typewriter ribbons Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/12/94	Amount of Each Disbursement This Period 25.82
E. Full Name, Mailing Address and ZIP Code Targeted Creative Comm. 801 N. Fairfax, Ste 308 Alexandria, VA 22314	Purpose of Disbursement brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/14/94	Amount of Each Disbursement This Period 13,950.00
F. Full Name, Mailing Address and ZIP Code Marsid Press 459 Westbury Avenue Carle Place, NY 11514	Purpose of Disbursement invitations 10/26 Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/94	Amount of Each Disbursement This Period 665.75
G. Full Name, Mailing Address and ZIP Code Jewish World 115 Middle Neck Rd Great Neck, NY 11021	Purpose of Disbursement newspaper ad for campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/18/94	Amount of Each Disbursement This Period 840.00
H. Full Name, Mailing Address and ZIP Code Election Computer Services 118 E. 37th St. New York, New York 10016	Purpose of Disbursement mailing labels postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/18/94	Amount of Each Disbursement This Period 4,975.65
I. Full Name, Mailing Address and ZIP Code Multi media Services 801 N. Fairfax, Ste 312 Alexandria, VA 22314	Purpose of Disbursement media buy Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/3/94	Amount of Each Disbursement This Period 57,012.50

SUBTOTAL of Disbursements This Page (optional)

94,088.50

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER
17

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)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code E. Pira 1665 Paul Lane Seaford, NY 11783	Purpose of Disbursement printing of envelopes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/3/94	Amount of Each Disbursement This Period 195.50
B. Full Name, Mailing Address and ZIP Code The Monocle 107 D Street NE Washington, DC 20002	Purpose of Disbursement fundraiser 9/21 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/3/94	Amount of Each Disbursement This Period 1365.00
C. Full Name, Mailing Address and ZIP Code Thomas Lankford PO Box 1504 Washington DC 20013	Purpose of Disbursement record reprint Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/6/94	Amount of Each Disbursement This Period 22.00
D. Full Name, Mailing Address and ZIP Code Irish Echo 309 5th Avenue New York, NY 10016	Purpose of Disbursement newspaper ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/6/94	Amount of Each Disbursement This Period 342.00
E. Full Name, Mailing Address and ZIP Code Peter T. King 1442 Roth Rd Seaford, NY 11783	Purpose of Disbursement misc. exp. tolls, parking-meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/6/94	Amount of Each Disbursement This Period 89.30
F. Full Name, Mailing Address and ZIP Code Chemical Bank PO Box 8607 Hicksville, NY 11801	Purpose of Disbursement photos, meals, cocktail party Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/4/94	Amount of Each Disbursement This Period 552.27
G. Full Name, Mailing Address and ZIP Code Quicic's Photo BELLMORE AVE. BELLMORE, N.Y. 11710	Purpose of Disbursement photo developing Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/29/94 9/25/94	Amount of Each Disbursement This Period 11.92 memo 15.33 memo
H. Full Name, Mailing Address and ZIP Code U.S. HOUSE RESTAURANT WASHINGTON, D.C. 20515	Purpose of Disbursement CONSTITUENT MEALS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/21/94	Amount of Each Disbursement This Period 12.30 memo
I. Full Name, Mailing Address and ZIP Code THE MONOCLE 107 D ST. NE WASHINGTON, D.C. 20002	Purpose of Disbursement FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/21/94	Amount of Each Disbursement This Period 486.72 memo

SUBTOTAL of Disbursements This Page (optional)

2566.07

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
FOR LINE NUMBER
17

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)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code <i>AMERICAN EXPRESS</i> <i>P.O. BOX 114</i> <i>NEWARK, N.J. 07101-0114</i>	Purpose of Disbursement <i>AIRLINE TICKETS</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>10/4/94</i>	Amount of Each Disbursement This Period <i>300.00</i>
B. Full Name, Mailing Address and ZIP Code <i>DELTA AIRLINES</i> <i>NATIONAL AIRPORT</i> <i>WASHINGTON, D.C.</i>	Purpose of Disbursement <i>AIRLINE TICKETS</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>9/20-9/24/94</i>	Amount of Each Disbursement This Period <i>300.00 MEMO</i>
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

96954.57