

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
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Aug 28 11 08 AM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE  
C00309450 081996  
JOHN J PRIVITERA  
FRIENDS OF LEE WASSERMAN  
PO BOX 7046  
ALBANY NY 12225

2. FEC IDENTIFICATION NUMBER  
C00309450

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

### 4. TYPE OF REPORT

- April 15 Quarterly Report
- 12-Day Pre-Election Report for the Primary (Type of Election)  
election on Sept 10 in the State of New York
- July 15 Quarterly Report
- October 15 Quarterly Report
- 30-Day Post-Election Report for the \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination Report

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election


### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
7/1/96 through 8/21/96		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	26,291.16	192,304.57
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	26,291.16	192,304.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	51,495.86	115,595.58
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	51,495.86	115,595.58
8. Cash on Hand at Close of Reporting Period (from Line 27)	87,169.86	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

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

Type or Print Name of Treasurer: JOHN J. PRIVITERA

Signature of Treasurer: 

Date: 8/26/96

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

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FEC FORM 3  
(revised 4/87)

96-03-6223-0193

# DETAILED SUMMARY PAGE

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

Name of Committee (in full)

Friends of Lee Wasserman

Report covering the Period:

From July 1, 1996 to Aug 21, 1996

## I. RECEIPTS

	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	11,150.00		11(a)(i)
(ii) Unitemized	11,042.00		11(a)(ii)
(iii) Total of contributions from individuals	22,192.00	170,928.97	11(a)(iii)
(b) Political Party Committees			11(b)
(c) Other Political Committees (such as PACs)	3,500.00	15,750.00	11(c)
(d) The Candidate	599.16	5,025.60	11(d)
(e) <b>TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))</b>	<b>26,291.16</b>	<b>192,304.57</b>	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>			12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) <b>TOTAL LOANS (add 13(a) and (b))</b>			13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>			14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	630.89	1,256.00	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	<b>26,922.05</b>	<b>193,560.57</b>	16
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b>	51,495.86	115,595.89	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>			18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) <b>TOTAL LOAN REPAYMENTS (add 19(a) and (b))</b>			19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees			20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)			20(c)
(d) <b>TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))</b>			20(d)
<b>21. OTHER DISBURSEMENTS</b>	2369.07	7797.77	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	<b>53864.93</b>	<b>123,393.66</b>	22

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 914,127.74		23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 26,922.05		24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 941,034.79		25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 53,864.93		26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 887,169.86		27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE	OF
1	1
FOR LINE NUMBER	
110	

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NAME OF COMMITTEE (in Full)

*Friends of Lee Wasserman*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Lee Wasserman 260 S. Main Ave Albany NY 12210</i>		<i>7/1/96 - 8/2/96</i>	<i>599.16</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Candidate</i>	Aggregate Year-to-Date: <i>\$ 562560</i>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date: <i>\$</i>	

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

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)  
**Friends of Lee Wasserman**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Albank Empire State Plaza Albany N.Y. 12220	Payroll Related	7/13/96	1456.96
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96 8/10/96	86.77 1456.96
Amanda Mitchell 1286 Wendell Ave. Schenectady, N.Y. 12302	Consulting	7/3/96	500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96 7/31/96	500.00 450.00
Barn Raisers 227 So. Pearl St Albany N.Y. 12207	Rent	7/11/96	700.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/2/96	700.00
D. Full Name, Mailing Address and ZIP Code	Utilities Reimbursement	7/12/96	189.52
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Central Business Equipment 3 Northway Lane Latham N.Y. 12110	Copier Rental	7/18/96	270.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/96	270.00
F. Full Name, Mailing Address and ZIP Code Ethan Schoolman 244 Murray Ave Delmar N.Y. 12054	Consulting	8/1/96	550.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	500.00
G. Full Name, Mailing Address and ZIP Code Excel Telecommunications PO Box 650582 Dallas, Texas 75265	Telephone	7/10/96	531.90
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/96	257.48
H. Full Name, Mailing Address and ZIP Code Fred DeVito 611 Broadway at Houston New York, N.Y. 10012	Postage Reimbursement	7/31/96	380.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Printing	7/31/96	3014.18
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	11,813.97
TOTAL This Period (last page this line number only)	

FORM NO. 1007-1-87 (REV. 12-86)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Friends of Lee Wasserman

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
Kinko's 100 State St Albany, N.Y. 12207	XEROXING	7/1/96	7.52	
		7/9/96	26.24	
		7/11/96	3.37	
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		7/11/96	4.48	
		7/26/96	9.07	
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		7/31/96	7.60	
		8/1/96	113.54	
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		8/13/96	62.56	
		8/14/96		
Laura Haight RR 1 Box 249 Pine Plains, N.Y. 12567	Consulting	7/31/96	165.00	
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		Telephone Reimbursement	7/31/96	167.70
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		Advertising	8/15/96	13,743.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		Payroll	7/10/96	958.96
			7/25/96	958.96
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		Payroll	8/8/96	958.96
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period	
		Supply Reimbursement	8/18/96	38.03

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

17,232.61

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) Friends of Lee Wasserman

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maya Nassbaum 2980 Rosendale Rd. Schenectady, N.Y. 12309	Consulting	8/1/96	450.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	500.00
B. Full Name, Mailing Address and ZIP Code	Supply Reimbursement	8/1/96	100.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/96	28.24
C. Full Name, Mailing Address and ZIP Code	Food Reimb.	8/20/96	39.83
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Xeroxing Reimb	8/20/96	1.62
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Postage Reimb	7/18/96	17.25
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Consulting	7/3/96	500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/96	500.00
G. Full Name, Mailing Address and ZIP Code	Consulting	8/1/96	500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	400.00
H. Full Name, Mailing Address and ZIP Code	Food Reimbursement	7/24/96	45.58
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Telephone	7/31/96	573.87
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/96	805.83

SUBTOTAL of Disbursements This Page (optional) .....	4,462.22
TOTAL This Period (last page this line number only) .....	

96-01-620-012

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Friends of Lee Wasserman

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
N.Y.S. Dept of Unemployment PO Box 1589 Albany NY. 12201	Payroll Related Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	477.22
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NYS Income Tax PO Box 3969 New York, NY. 10008	Payroll Related Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96 8/10/96	654.95 222.70
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office map 1814 Central Ave Albany NY. 12205	Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96 7/31/96 8/20/96	236.04 134.21 261.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pat Sterling PO Box 278 New Baltimore NY. 12129	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/96	318.75
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Supply Reimb Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/96	29.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postal Service Alfred E Smith Bldg Albany, NY. 12225	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/96 7/1/96 7/11/96	200.00 128.00 192.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/12/96 7/23/96 7/24/96	100.00 160.00 100.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/96 7/31/96 8/2/96	60.00 200.00 160.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	195.00

SUBTOTAL of Disbursements This Page (optional)

3,829.37

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 5 OF 6  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Friends of Lee Wasserman

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Planned Parenthood 259 Lark St Albany N.Y. 12210	Phone Banking Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/96	548.04
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rebecca Spilke 88 Willett St Apt 5A Albany N.Y. 12210	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/3/96 7/8/96 8/1/96	500.00 500.00 500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Food Reimb Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/96	8.76
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robinson & Munster 1208 Elkhorn St Sioux Falls S.D. 57104	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/96	7247.50
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sarah Blabey 27 Wexford Rd Almar, N.Y. 12054	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/3/96 7/8/96 8/1/96	500.00 500.00 500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wendy Saunders 27 Forest Ave Albany N.Y. 12208	Payroll Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/9/96 7/25/96 8/8/96	716.49 716.49 716.49
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

13953.97

TOTAL This Period (last page this line number only)

96.01.620.0000



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 6 OF 6  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

*Friends of Lee Wasserman*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Computer Rentals of 1500 Central Ave. Albany, N.Y. 12205</i>	<i>Computer Rental</i>	<i>8/19/96</i>	<i>204.12</i>
B. 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
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)

*204.12*

TOTAL This Period (last page this line number only)

*51,495.86*

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS: Ames, Oakes 308 East 79th Street New York, NY 10021	NAME OF EMPLOYER: Self OCCUPATION: Retired	DATE 08/17/96	AMOUNT \$300.00
RECEIPT FOR: Primary		AGGREGATE YEAR-TO-DATE: \$950.00	
B> FULL NAME & ADDRESS: Spencer, Theodore 26 Bank St. New York, NY 10011	NAME OF EMPLOYER: Self OCCUPATION: Journalist	DATE 07/21/96	AMOUNT \$500.00
RECEIPT FOR: General		AGGREGATE YEAR-TO-DATE: \$1,500.00	
C> FULL NAME & ADDRESS: Washington, Val 2487 Ridge Road Scotia, NY 12302	NAME OF EMPLOYER: Environmental Advocates OCCUPATION: Executive Director	DATE 08/11/96	AMOUNT \$200.00
RECEIPT FOR: Primary		AGGREGATE YEAR-TO-DATE: \$300.00	
D> FULL NAME & ADDRESS: Rice, Michael 69 Nine Mile La Delmar, NY 12054	NAME OF EMPLOYER: NYS Assembly OCCUPATION: Consultant	DATE 08/16/96	AMOUNT \$100.00
RECEIPT FOR: Primary		AGGREGATE YEAR-TO-DATE: \$300.00	
E> FULL NAME & ADDRESS: Neale, Jr., J. Henry 222 Mamaroneck White Plains, NY 10605	NAME OF EMPLOYER: Reed & Neale OCCUPATION: Attorney	DATE 07/23/96	AMOUNT \$100.00
RECEIPT FOR: Primary		AGGREGATE YEAR-TO-DATE: \$350.00	
F> FULL NAME & ADDRESS: McCall, David 136 E. 64th Street New York, NY 10021	NAME OF EMPLOYER: Sheparson, Stern, et al. OCCUPATION: Creative Consultan	DATE 07/12/96	AMOUNT \$500.00
RECEIPT FOR: General		AGGREGATE YEAR-TO-DATE: \$1,500.00	
G> FULL NAME & ADDRESS: Heiskell, Marian 870 UN Plaza New York, NY 10017	NAME OF EMPLOYER: New 42nd Street Inc. OCCUPATION: Executive	DATE 08/06/96	AMOUNT \$500.00
RECEIPT FOR: Primary		AGGREGATE YEAR-TO-DATE: \$1,000.00	
TOTAL This Period (last page this line number only) .....			

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Davidson, Joan 157 E. 75th Street New York, NY 10021	Self	07/03/96	\$150.00
	OCCUPATION: Retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$400.00		
B> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Grant, Eugene 277 Park Avenue New York, NY 10172	Self	08/11/96	\$250.00
	OCCUPATION: Real Estate Invest		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$500.00		
C> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Zox, Kathryn 81 Thorndale Rd. Slingerlands, NY 12159	Self	08/09/96	\$250.00
	OCCUPATION: homemaker		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$350.00		
D> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Gordon, Shirley 21 Loudon Heights N. Loudonville, NY 12211	Self	07/07/96	\$50.00
	OCCUPATION: Consultant		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
E> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Burgher, Sonya 1120 Park Ave. Rochester, NY 14610	Retired	08/16/96	\$500.00
	OCCUPATION: Retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$1,000.00		
F> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Glennon, Robert 87 Northwood Rd. Lake Placid, NY 12946	Ecol. Sust. Development	08/09/96	\$100.00
	OCCUPATION: VP for Pgm		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$350.00		
G> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Klepper, Ruth 4 Wilan Ln. Albany, NY 12203	Self	08/08/96	\$100.00
	OCCUPATION: Retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$550.00		
TOTAL This Period (last page this line number only) .....			

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS: Sabo, Ruth 40 Buckbee Rd. Troy, NY 12190	NAME OF EMPLOYER: Family Planning Advocates  OCCUPATION: Consultant	DATE 08/16/96	AMOUNT \$100.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$300.00		
B> FULL NAME & ADDRESS: DeSalvo, Albert 67 Glendale Ave. Albany, NY 12208	NAME OF EMPLOYER: C.D. Habitat for Humanity  OCCUPATION: Executive Director	DATE 08/16/96	AMOUNT \$50.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
C> FULL NAME & ADDRESS: Reid, Whitelaw 73 West Patent Rd. Bedford Hills, NY 10507	NAME OF EMPLOYER: Self  OCCUPATION: Retired	DATE 07/23/96	AMOUNT \$50.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$350.00		
D> FULL NAME & ADDRESS: Gilchrist Gleacher, Anne 1133 Fifth Ave. New York, NY 10128	NAME OF EMPLOYER: Self  OCCUPATION: Homemaker	DATE 07/02/96	AMOUNT \$500.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$1,000.00		
E> FULL NAME & ADDRESS: Chernov, Joel 444 Central Park West New York, NY 10025	NAME OF EMPLOYER: Parker, Chapin, et al, LP  OCCUPATION: Attorney	DATE 07/01/96	AMOUNT \$100.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$350.00		
F> FULL NAME & ADDRESS: Schrank, William 131 E. 94th Street New York, NY 10128	NAME OF EMPLOYER: NRDC  OCCUPATION: Consulting Attny	DATE 07/16/96	AMOUNT \$250.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$750.00		
G> FULL NAME & ADDRESS: Lepow, Martha 73 E. Bentwood Ct. Albany, NY 12203	NAME OF EMPLOYER: Albany Medical College  OCCUPATION: professor	DATE 08/09/96	AMOUNT \$100.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$450.00		
TOTAL This Period (last page this line number only) .....			

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS: Johansson, Mildred 72 Smokey Hollow Rd. East Berne, NY 12059	NAME OF EMPLOYER: self	DATE 08/16/96	AMOUNT \$100.00
	OCCUPATION: retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$350.00		
B> FULL NAME & ADDRESS: Hohenberg, Alane 4 Westover Road Troy, NY 12180	NAME OF EMPLOYER: alb. Co. Hist. Assoc.	DATE 08/09/96	AMOUNT \$100.00
	OCCUPATION: Museum Admin.		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$600.00		
C> FULL NAME & ADDRESS: Simon, John 152 Chestnut St. Albany, NY 12210	NAME OF EMPLOYER: Albany Medical Center	DATE 08/16/96	AMOUNT \$250.00
	OCCUPATION: Ped. Ophthalmologia		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$300.00		
D> FULL NAME & ADDRESS: Daves, Pamela 22 East Road Brunswick Hills Troy, NY 12180	NAME OF EMPLOYER: self	DATE 08/17/96	AMOUNT \$250.00
	OCCUPATION: physical therapist		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$375.00		
E> FULL NAME & ADDRESS: Wasserman, Ernest 56 Woodside Drive Albany, NY 12208	NAME OF EMPLOYER: self	DATE 08/08/96	AMOUNT \$200.00
	OCCUPATION: retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$300.00		
F> FULL NAME & ADDRESS: Sterling, Patricia P.O. Box 278 New Baltimore, NY 12124	NAME OF EMPLOYER: Environmental Advocates	DATE 08/06/96	AMOUNT \$250.00
	OCCUPATION: Bookkeeper		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$275.00		
G> FULL NAME & ADDRESS: Sterling, Jeffrey P.O. Box 278 New Baltimore, NY 12124	NAME OF EMPLOYER: self	DATE 08/06/96	AMOUNT \$250.00
	OCCUPATION: contractor		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$275.00		
TOTAL This Period (last page this line number only) .....			

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Gregg, Jr., Robert Bear Hill Road Hanniker, NH 03242	Land Vest	07/08/96	\$500.00
	OCCUPATION: Vice President		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$500.00		
<del>B&gt; FULL NAME &amp; ADDRESS:</del>	<del>NAME OF EMPLOYER:</del>	<del>DATE</del>	<del>AMOUNT</del>
<del></del>	<del>OCCUPATION:</del>	<del></del>	<del></del>
<del>RECEIPT FOR:</del>	<del>AGGREGATE YEAR-TO-DATE:</del>		
C> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Schrenk, Kay 131 E. 94th Street New York, NY 10128	self	07/16/96	\$250.00
	OCCUPATION: retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
D> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Shaw, George 852 Wright Avenue Schenectady, NY 12309	Union College	07/20/96	\$500.00
	OCCUPATION: Professor		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$500.00		
E> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Holt, William 40 Autumn Drive Slingerlands, NY 12159	self	08/08/96	\$250.00
		08/15/96	\$500.00
	OCCUPATION: Retired	08/16/96	\$250.00
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$1,000.00		
F> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Overton, Joan 78 Balmville Rd. Newburgh, NY 12550	self	08/11/96	\$150.00
	OCCUPATION: Homemaker		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
G> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Greens, Wade 30 Rockefeller Plaza NY, NY 10019	self	08/11/96	\$500.00
	OCCUPATION: Philanthropy Advi		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$500.00		
TOTAL This Period (last page this line number only) .....			

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Rosmarin-Plattner, Lauri 1747 New Scotland Rd. Slingerlands, NY 12159	self	08/11/96	\$250.00
	OCCUPATION: Homemaker		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
B> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Crane, Sarah 10 Schermerhorn Brooklyn, NY 11201	self	08/16/96	\$250.00
	OCCUPATION: retired		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$250.00		
C> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Booth, David 15 Garden Place Brooklyn Heights, NY 11201	Morgan Stanley and Co.	08/17/96	\$500.00
	OCCUPATION: Investment Banker		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$500.00		
D> FULL NAME & ADDRESS:	NAME OF EMPLOYER:	DATE	AMOUNT
Wood, Lyman 95 Mountain Road Hampden, MA 01036	FOLIET College Stores Inc.	08/17/96	\$1,000.00
	OCCUPATION: Business Executive		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$1,000.00		
TOTAL This Period (last page this line number only)			\$11,150.00

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NAME OF COMMITTEE: Friends of Lee Wasserman

A> FULL NAME & ADDRESS: New York ChoicePac 1202 Lexington Ave. New York, NY 10028	NAME OF EMPLOYER:	DATE 08/06/96	AMOUNT \$1,000.00
	OCCUPATION:		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$3,000.00		

B> FULL NAME & ADDRESS: ATLA Pac 1050 31st Street, N.W. Washington, DC 20007	NAME OF EMPLOYER:	DATE 08/16/96	AMOUNT \$2,500.00
	OCCUPATION:		
RECEIPT FOR: Primary	AGGREGATE YEAR-TO-DATE: \$5,000.00		

TOTAL This Period (last page this line number only) .....	\$3,500.00
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