

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION 6-11-98

JUL 18 12 17 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**FRIENDS OF MAURICE HINCHAY**

ADDRESS (number and street)  Check if different than previously reported.  
**PO BOX 4497**

CITY, STATE and ZIP CODE **KINGSTON, NY 12402** STATE/DISTRICT **26<sup>th</sup>**

2. FEC IDENTIFICATION NUMBER  
**COO272633**

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

### 4. TYPE OF REPORT

April 15 Quarterly Report  12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

July 15 Quarterly Report  30-Day Post-Election Report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

October 15 Quarterly Report  Termination Report

January 31 Year End Report

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

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
<b>4/1/98 through 6/30/98</b>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	<b>173,520</b>	<b>261,806</b>
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<b>173,520</b>	<b>261,806</b>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<b>59,600</b>	<b>140,376</b>
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<b>59,600</b>	<b>140,376</b>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<b>173,346</b>	
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  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-218-3420

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 **SUSANNE MERL**

Signature of Treasurer *Susanne Merl* Date **7/15/98**

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

# DETAILED SUMMARY PAGE

## of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In Full) FRIENDS OF MAURICE HINCHY Report Covering the Period: From 4/1/98 To 6/30/98

	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>I. RECEIPTS</b>		
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) -----	57,555	
(ii) Unitemized -----	39,265	
(iii) Total of contributions from individuals -----	96,820	155,806
(b) Political Party Committees -----	10	10
(c) Other Political Committees (such as PACs) -----	76,690	105,990
(d) The Candidate -----		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----	173,520	261,806
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b> -----		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate -----		
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b> -----		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> -----	544	950
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> -----	174,064	262,756
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b> -----	54,600	140,376
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b> -----		
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate -----		
(b) Of All Other Loans -----		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----		
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees -----	600	600
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----		
<b>21. OTHER DISBURSEMENTS</b> -----	27,000	27,500
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b> -----	87,200	168,476

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$	86,482
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$	174,064
25. SUBTOTAL (add Line 23 and Line 24) -----	\$	260,546
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$	87,200
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$	173,346

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 1 OF 2  
FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code Jonathan Culler 808 Wyckoff Rd. Ithaca, NY 14850	Name of Employer Cornell University  Occupation Teacher	Date (month, day, year)  5/16/98	Amount of Each Receipt This Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Elizabeth Horton 238 Central Park West New York, NY 10024	Name of Employer Nat'l Council Research for Women  Occupation Administrator	Date (month, day, year)  4/22/98	Amount of Each Receipt This Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Michael Dal Giudice Fallen Pines Farm 412 Milan Hill Road Red Hook, NY 12671	Name of Employer Millennium Markets  Occupation Investment Banker	Date (month, day, year)  6/5/98	Amount of Each Receipt This Period  \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Melva Wade 45 Hombeck Lane Accord, NY 12404	Name of Employer   Occupation Retired	Date (month, day, year)  5/15/98	Amount of Each Receipt This Period  \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 1,500.00	
E. Full Name, Mailing Address and ZIP Code Alexander Abraham 830 Park Avenue New York, NY 10028	Name of Employer Palma Weber  Occupation Investments	Date (month, day, year)  6/5/98	Amount of Each Receipt This Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Nicholas Angell High House, S. Mtn. Pass R.R. 2, Box 313 Garrison, NY 10524	Name of Employer Atrici & Angell  Occupation Attorney	Date (month, day, year)  6/1/98	Amount of Each Receipt This Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 350.00	
G. Full Name, Mailing Address and ZIP Code James Arnold 2425 Ellentown Rd. La Jolla, CA 92037	Name of Employer Univ. of CA  Occupation Professor	Date (month, day, year)  6/22/98	Amount of Each Receipt This Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 1,000.00	

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

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributors from Individuals/Persons

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

PAGE 2 OF 22  
FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey CD0272633

<p><b>A. Full Name, Mailing Address and ZIP Code</b> League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> NOTE: Above Contribution earmarked through this organization</p> <p>Occupation TOTAL FROM CONDUIT</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p>	<p><b>Amount of Each Receipt this Period</b> MEMO \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> James Arnold 2425 Ellantown Rd. La Jolla, CA 92037</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b> Univ. of CA</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>8/28/98</p> <p>\$1,000.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> NOTE: Above Contribution earmarked through this organization</p> <p>Occupation TOTAL FROM CONDUIT</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period MEMO \$500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Charles Bagley 1235 - 8th Ave. W Seattle, WA 98119</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b> Northwest Cancer Center</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>5/26/98</p> <p>\$1,000.00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Palmer Baker 1345 Ave. of Americas 34th Floor New York, NY 10105</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b> Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>5/12/98</p> <p>\$350.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Roman Baranowsky P.O. Box 188 Kerhonkson, NY 12446</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>8/24/98</p> <p>\$350.00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Eli Basch 181 N Manor Avenue Kingston, NY 12401</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b> Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>8/20/98</p> <p>\$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>

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

**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 24  
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code Barry Benepe 311 Clark Van Vlieden Rd. Saugerties, NY 12477	Name of Employer Self  Occupation Planning Consultant	Date (month, day, year) 5/4/98 5/13/98	Amount of Each Receipt This Period \$100.00 \$80.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 260.00		
B. Full Name, Mailing Address and ZIP Code Miriam Berg P.O. Box 407 Bearsville, NY 12408	Name of Employer Self  Occupation Writer	Date (month, day, year) 5/11/98	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 600.00		
C. Full Name, Mailing Address and ZIP Code Bob Berman 2 River Road Woodridge, NY 12789	Name of Employer Monticello Raceway  Occupation Co-Owner	Date (month, day, year) 6/12/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Leonard Blavatnik 1009 Park Avenue, #5A New York, NY 10028-0938	Name of Employer Access Industries  Occupation President	Date (month, day, year) 6/5/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Emily Blavatnik 1009 Park Avenue New York, NY 10028-0938	Name of Employer   Occupation Mother	Date (month, day, year) 6/5/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Joan Blum 983 Park Ave. Apt 7A New York, NY 10021	Name of Employer Self  Occupation Homemaker	Date (month, day, year) 5/22/98	Amount of Each Receipt This Period \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 300.00		
G. Full Name, Mailing Address and ZIP Code Ned Brown 205 Third Avenue, #21A New York, NY 10003	Name of Employer FMC Holdings, Inc.  Occupation Affordable Lending Analyst	Date (month, day, year) 6/5/98	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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PAGE 4 OF 22  
FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey CD0272833

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah Burke 845 West End Ave. Apt. 14A New York, NY 10025-8435	Self	5/6/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Social Worker	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
Albert Butzel 1125 Park Ave. New York, NY 10128	Self	5/13/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Consultant/Attorney	Aggregate Year-to-Date \$	\$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Catherine Cahill 775 Park Avenue New York, NY 10021	Self	5/6/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Best effort	Aggregate Year-to-Date \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Cahill 1088 Park Avenue New York, NY 10128	Am. Mus. of Natl. Hist.	4/21/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Museum Admin.	Aggregate Year-to-Date \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin Carovano 26 St. Agnes Lane Loudonville, NY 12211	Nature Conservancy	5/26/98	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Administrator	Aggregate Year-to-Date \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Chase 355 Blackstone Blvd. Apt. #103 Providence, RI 02906		5/13/98	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20035	NOTE: Above Contribution earmarked through this organization		MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TOTAL FROM CONDUIT	Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional)

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 12  
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey 000272833

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Helen Chase 355 Blackstone Blvd. Apt. #103 Providence, RI 02906		5/16/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$	\$850.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steve Charlys 221 N.W. 101 Avenue Plantation, FL 33324	Self	6/26/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Consultant	Aggregate Year-to-Date \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Constance Clapp 160 E 72nd St. New York, NY 10021		5/13/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date \$	\$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stanley Coffman 208 N. Manor Ave. Kingston, NY 12401		5/22/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lawrence Cooke 415 Broadway Monticello, NY 12701		5/11/98	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ann Crawford P.O. Box 36 Boltonville, NY 12412-0036		6/10/98 6/12/98	\$65.00 \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date \$	\$265.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph Cullman 100 Park Avenue New York, NY 10017	Self	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Investments	Aggregate Year-to-Date \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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PAGE 6 OF 12  
FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey 000272633

A. Full Name, Mailing Address and ZIP Code Robert Davengott 5 E. 22nd St., 22C New York, NY 10010  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Nat'l. Development Council  Occupation Finance  Aggregate Year-to-Date \$	Date (month, day, year)  4/14/98  \$500.00	Amount of Each Receipt this Period  \$500.00
B. Full Name, Mailing Address and ZIP Code Lisa Downer 863 Zena Road Woodstock, NY 12498  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer   Occupation Retired  Aggregate Year-to-Date \$	Date (month, day, year)  5/13/98  \$500.00	Amount of Each Receipt this Period  \$500.00
C. Full Name, Mailing Address and ZIP Code Chris Downey 2727 34th Place NW Washington, DC 20007  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer   Occupation Homemaker  Aggregate Year-to-Date \$	Date (month, day, year)  4/4/98  \$500.00	Amount of Each Receipt this Period  \$500.00
D. Full Name, Mailing Address and ZIP Code James Duffy Kramer, Duffy, et al 238 Broadway New York, NY 10279  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Kramer, Dilloff, et al  Occupation Attorney  Aggregate Year-to-Date \$	Date (month, day, year)  6/5/98  \$250.00	Amount of Each Receipt this Period  \$250.00
E. Full Name, Mailing Address and ZIP Code Helen Edey Seven Galias Farm Vineyard Haven, MA 02569  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer   Occupation Retired  Aggregate Year-to-Date \$	Date (month, day, year)  5/5/98  \$500.00	Amount of Each Receipt this Period  \$500.00
F. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT  Aggregate Year-to-Date \$	Date (month, day, year)     \$500.00	Amount of Each Receipt this Period MEMO \$500.00
G. Full Name, Mailing Address and ZIP Code Kim Ellman 99 Park Avenue, Ste. 2200 New York, NY 100181801  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer Open Space Institute  Occupation President  Aggregate Year-to-Date \$	Date (month, day, year)  6/15/98  \$250.00	Amount of Each Receipt this Period  \$250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 7 OF 22  
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mrs. Eweson Eweson 1641 Langer Crossroads Far Hills, NJ 07931	Retired	4/21/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Name of Employer NOTE: Above Contribution earmarked through this organization	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TOTAL FROM CONDUIT Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Joan Farrow 34 Benton Ave. Monticello, NY 12701	Name of Employer Frontier Insurance	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Vice President Aggregate Year-to-Date > \$	5/11/98	\$250.00
D. Full Name, Mailing Address and ZIP Code Martha Ferger P.O. Box 8 Dryden, NY 13058	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	6/29/98	\$250.00
E. Full Name, Mailing Address and ZIP Code Barbara Fife 25 Central Park West New York, NY 10023	Name of Employer Barnard College	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Administrator Aggregate Year-to-Date > \$	4/22/98	\$500.00
F. Full Name, Mailing Address and ZIP Code Barbara Finberg 165 East 72nd Street Apt. 19L New York, NY 10021	Name of Employer Carnegie Corp. of NY	Date (month, day, year)	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Executive Aggregate Year-to-Date > \$	6/6/98	\$500.00
G. Full Name, Mailing Address and ZIP Code Bert Fingerhut 1520 Silverking Drive Aspen, CO 81611	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	5/16/98	\$250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 8 OF 12  
FOR LINE NUMBER 11(a)()

Any information copied from such Reports and Statements may not be sold or used by any person for the purposes 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)**  
Friends of Maurice Hinchey C00272833

A. Full Name, Mailing Address and ZIP Code Naomi Franklin 3670 Millcreek Rd. Salt Lake City, UT 84109	Name of Employer University of Utah  Occupation Research Biologist	Date (month, day, year)  5/27/98	Amount of Each Receipt this Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Victor Franco 5855 Topanga Canyon Blvd #410 Woodland Hills, CA 91367	Name of Employer Barkin, Pemen & Schwager  Occupation Attorney	Date (month, day, year)  6/30/98	Amount of Each Receipt this Period  \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$300.00	
D. Full Name, Mailing Address and ZIP Code Abel Garraghan 625 Sawkill Road Kingston, NY 12401-7101	Name of Employer HeritageEnergy  Occupation CEO	Date (month, day, year)  6/12/98	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Robert Ginsberg 275 West 98th St. New York, NY 10025	Name of Employer Ginsberg & Broome  Occupation Attorney	Date (month, day, year)  6/3/98	Amount of Each Receipt this Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code William Golden 40 Wall Street New York, NY 10005	Name of Employer Self  Occupation Attorney	Date (month, day, year)  6/16/98	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
G. Full Name, Mailing Address and ZIP Code Marian Holtskell 670 United Nations Plaza Apt. 31/32c New York, NY 10017	Name of Employer NY Times  Occupation Corporate Director	Date (month, day, year)  6/6/98	Amount of Each Receipt this Period  \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	

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

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE OF 22  
FOR LINE NUMBER 11(#X)

Contributions from Individuals/Persons

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 FUR)**

Friends of Maurice Hinchey CD0272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anna Hess 214 E. 18th St New York, NY 10003	Self	4/22/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Joe Hill UPO Box 3053 Kingston, NY 12402	Name of Employer Information requested	Date (month, day, year) 5/11/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Best efforts made	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code Elise Jones 108 Beaumont Dr. Newtown, PA 18940	Name of Employer Self	Date (month, day, year) 5/15/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Demographer	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Name of Employer NOTE: Above Contribution earmarked through this organization	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TOTAL FROM CONDUIT	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Henry Jordan 1465 Horseshoe Trail Chester Springs, PA 19425	Name of Employer Clanail Enterprises	Date (month, day, year) 5/13/98	Amount of Each Receipt this Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$350.00
F. Full Name, Mailing Address and ZIP Code Sara Koffman 300 Plaza Drive Vestal, NY 13850	Name of Employer	Date (month, day, year) 4/3/98	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Victor Kowner 27 W. 67th St. New York, NY 10023	Name of Employer Self	Date (month, day, year) 6/5/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 10 OF 22  
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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herbert Kurz 630 Sherry Dr. Valley Cottage, NY 10989	Prudential Life Insurance	6/6/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Executive 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
Randy Lee 260 Christopher Lane Staten Island, NY 10314	Self	4/21/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$1,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Orin Lehman 20 E. 69th St. #4C New York, NY 10021	Orin Lehman Foundation	6/5/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Mandelbaum 289 Richmond Parkway Kingston, NY 12401	Self	8/12/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Physician Aggregate Year-to-Date: \$	\$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise McCagg 32 Washington Square West New York, NY 10011	Self	6/15/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation: Sculptor Aggregate Year-to-Date: \$	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barney McHenry 164 E. 72nd Street New York, NY 10021	NYS Greenway Conservancy	4/3/98 5/26/98	\$200.00 \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$600.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jan Montgomery 942 Via Fruteria Santa Barbara, CA 93110	Self	6/5/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$500.00	

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(8)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272833

A. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$500.00
B. Full Name, Mailing Address and ZIP Code Marlin Nelson 16 W. 77th St. #12E New York, NY 10024-5126  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer Self  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/22/98  \$350.00	Amount of Each Receipt this Period  \$250.00
C. Full Name, Mailing Address and ZIP Code Janet Nelson 16 W. 77th St. #12E New York, NY 10024-5126  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer Self  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)  4/22/98  \$250.00	Amount of Each Receipt this Period  \$250.00
D. Full Name, Mailing Address and ZIP Code Howard Nelson 50 Glose Road Greenwich, CT 06831  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer Self  Occupation Developer Aggregate Year-to-Date > \$	Date (month, day, year)  5/12/98  \$1,000.00	Amount of Each Receipt this Period  \$500.00
E. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$500.00
F. Full Name, Mailing Address and ZIP Code Heidi Nitz 1 West 72nd Street Apt. 9B New York, NY 10023  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer  Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year)  5/5/98  \$500.00	Amount of Each Receipt this Period  \$500.00
G. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey CD0272633

A. Full Name, Mailing Address and ZIP Code Ron Nyawaner 28 Maddaloni Rd. Huxley, NY 12443  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self  Occupation Writer  Aggregate Year-to-Date \$	Date (month, day, year)  5/22/98  \$250.00	Amount of Each Receipt this Period  \$250.00
B. Full Name, Mailing Address and ZIP Code Matthew Ostoyich 142 Sila Drive Saugerties, NY 12477  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Retired  Aggregate Year-to-Date \$	Date (month, day, year)  6/30/98  \$250.00	Amount of Each Receipt this Period  \$250.00
C. Full Name, Mailing Address and ZIP Code James Price 1172 Park Avenue New York, NY 10128  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Price & Marshall  Occupation Investments  Aggregate Year-to-Date \$	Date (month, day, year)  5/6/98  \$1,500.00	Amount of Each Receipt this Period  \$1,000.00
D. Full Name, Mailing Address and ZIP Code James Price 1172 Park Avenue New York, NY 10128  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Price & Marshall  Occupation Investments  Aggregate Year-to-Date \$	Date (month, day, year)  5/15/98  \$1,500.00	Amount of Each Receipt this Period  \$500.00
E. Full Name, Mailing Address and ZIP Code Sam Pryor 450 Lexington Ave. New York, NY 10017  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self  Occupation Attorney  Aggregate Year-to-Date \$	Date (month, day, year)  5/15/98  \$500.00	Amount of Each Receipt this Period  \$500.00
F. Full Name, Mailing Address and ZIP Code Robert Quintan RD 2 Box 361 Sheffield Hill Rd. Millerton, NY 12546  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self  Occupation Preservationist  Aggregate Year-to-Date \$	Date (month, day, year)  6/5/98  \$500.00	Amount of Each Receipt this Period  \$500.00
G. Full Name, Mailing Address and ZIP Code Carol Ray P.O. Box 5714 Stateline, NV 89449  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Retired  Aggregate Year-to-Date \$	Date (month, day, year)  6/12/98  \$550.00	Amount of Each Receipt this Period  \$500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judith Rhiller 471 Startight Road Monticello, NY 12701		6/12/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phyllis Roche 114 Clinton Street Brooklyn, NY 11201	Avon	5/28/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Market Research Aggregate Year-to-Date: \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurance Rockefeller 15 East 91st Street New York, NY 10128	National Resource Defense Council	6/5/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 1,500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurance Rockefeller 15 East 91st Street New York, NY 10128	National Resource Defense Council	6/30/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 1,500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wandy Rockefeller 15 East 91st Street New York, NY 10128	Natural Resources Def. Coun.	6/30/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 2,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wendy Rockefeller 15 East 91st Street New York, NY 10128	Natural Resources Def. Coun.	6/30/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$ 2,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chauncie Rodzianko P.O. Box 757 E. Lake Road Tuxedo Park, NY 10987		6/3/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Roth 31 South Road Kingston, NY 12401	Mid-Hudson Family	5/28/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: MD 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
Arthur Rotman Todd Mountain Rd. HCR 1, Box 74 Arkville, NY 12406		5/22/98	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Guy Saperstein 52 Glen St. Alpine Rd. Piedmont, CA 94611	Self	6/12/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Attorney Aggregate Year-to-Date: \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Shafer 286 Riverside Dr. New York, NY 10025	Self	6/5/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Lawyer/Artist Aggregate Year-to-Date: \$	\$250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Irving Shapiro 58 Willey Avenue Liberty, NY 12754		5/28/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry Sherman Timberline Trail P.O. Box 100 West Park, NY 12493-0100		6/10/98	\$130.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$230.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Spearman Halcyon Park 26 Parkside Dr. Lake Katina, NY 12449	MHVFCU	5/15/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: President Aggregate Year-to-Date: \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Springer 1401 K Street, NW Suite 400 Washington, DC 20005	The Washington Group	4/29/98	\$100.00
	Occupation Principal	6/23/98	\$100.00
	Aggregate Year-to-Date > \$	\$300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Julien Studley 300 Park Avenue New York, NY 10022	J.J. Studley, Inc.	4/2/98	\$1,000.00
	Occupation President		
	Aggregate Year-to-Date > \$	\$1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Kevin Sweeney 12 Dixon Ave. Woodstock, NY 12488	Simulaida, Inc.	5/28/98	\$250.00
	Occupation CEO		
	Aggregate Year-to-Date > \$	\$250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Robb Webb 255 West 84th St. Apt. #11B New York, NY 10024	Self	5/18/98	\$250.00
	Occupation Actor/Antique Dealer		
	Aggregate Year-to-Date > \$	\$250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code Robert Wilty 6 Weber St. Dryden, NY 13053	Cornell Finger Lakes Credit Union	6/19/98	\$300.00
	Occupation President/CEO		
	Aggregate Year-to-Date > \$	\$300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Robert Worth 1220 Park Avenue New York, NY 10128		6/1/98	\$660.00
	Occupation Retired		
	Aggregate Year-to-Date > \$	\$1,100.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Robert Worth 1220 Park Avenue New York, NY 10128		6/1/98	\$350.00
	Occupation Retired		
	Aggregate Year-to-Date > \$	\$1,100.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 16 OF 22  
FOR LINE NUMBER 11(a)(i)

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

**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272833

A. Full Name, Mailing Address and ZIP Code Katrina vanden Heuvel 340 Riverside Dr. Apt. 8B New York, NY 10025	Name of Employer The Nation  Occupation Editor	Date (month, day, year)  5/16/98	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 500.00	
B. Full Name, Mailing Address and ZIP Code Gertrude Hawley 1 Stryker Lane Kirkland, NY 13323	Name of Employer  Occupation Retired	Date (month, day, year)  6/30/98	Amount of Each Receipt this Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Peter Axelrod 10 West 15th Street New York, NY 10011	Name of Employer Asby International  Occupation Executive	Date (month, day, year)  6/5/98	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 500.00	
D. Full Name, Mailing Address and ZIP Code John Niles 5403 Moorland Lane Bethesda, MD 208141335	Name of Employer  Occupation Retired	Date (month, day, year)  6/26/98	Amount of Each Receipt this Period  \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 250.00	
E. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Name of Employer NOTE: Above Contribution earmarked through this organization  Occupation TOTAL FROM CONDUIT	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code Brooke Neidich 120 East End Avenue, 7A Cathedral, NY 10025	Name of Employer Self  Occupation Wife/Mother	Date (month, day, year)  6/15/98	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Ellnor L. Hallowell 115 N. Calle Resplendor Tucson, AZ 85716	Name of Employer  Occupation Retired	Date (month, day, year)  6/15/98	Amount of Each Receipt this Period  \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Aggregate Year-to-Date \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 17 OF 22  
FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer NOTE: Above Contribution earmarked through this organization	Date (month, day, year)	Amount of Each Receipt this Period MEMO
League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Occupation TOTAL FROM CONDUIT		\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code R. Lyman Wood 95 Mountain Road Hampden, MA 01036	Name of Employer Follett Corp.	Date (month, day, year) 6/5/98	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$	\$1,000.00	
C. Full Name, Mailing Address and ZIP Code League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	Name of Employer NOTE: Above Contribution earmarked through this organization	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation TOTAL FROM CONDUIT		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Roy H. Carlin 635 Berne Road High Falls, NY 12440	Name of Employer Self	Date (month, day, year) 6/1/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$	\$250.00	
E. Full Name, Mailing Address and ZIP Code Marian K. Chamberlain 60 Sutton Place South New York, NY 10022	Name of Employer National Council for Research on Wo	Date (month, day, year) 6/1/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Economist		
	Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code Sharon Davis 609 Fifth Avenue, 11th Fl. New York, NY 10017	Name of Employer Davis Selected Advisors	Date (month, day, year) 6/1/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Finance		
	Aggregate Year-to-Date > \$	\$500.00	
G. Full Name, Mailing Address and ZIP Code Nancy Meyer 684 Broadway, #6E New York, NY 10012	Name of Employer Self	Date (month, day, year) 6/1/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mother		
	Aggregate Year-to-Date > \$	\$250.00	

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

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger G. Garey 270 Moran Road Greene, NY 13778	Oxford Academy Central School	6/5/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Teacher Aggregate Year-to-Date: \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara S. Mosbacher 10 East 70th Street New York, NY 10021		5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Durst 1155 Avenue of the Americas New York, NY 10036	The Durst Organization	5/16/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Owner Aggregate Year-to-Date: \$	\$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Otlinger 818 The Crescent Mamaroneck, NY 105434592	Pace University	5/16/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Professor Aggregate Year-to-Date: \$	\$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eva A. Schultz 4711 Independence Avenue Bronx, NY 104713209		5/16/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John C. Hase 830 N. Spring Mill Road Villanova, PA 190851737		5/13/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$	\$500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036	NOTE: Above Contribution earmarked through this organization		MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: TOTAL FROM CONDUIT Aggregate Year-to-Date: \$		

SUBTOTAL of Receipts This Page (optional)

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 19 OF 22  
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Margaret D. Wilson 943 Canal Road Princeton, NJ 08540	Princeton University	5/13/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Professor Aggregate Year-to-Date: \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Priscilla Browning One Pleasant Grove Lane Ithaca, NY 14850		5/16/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lois Zoller 3180 N. Lake Shore Drive Chicago, IL 60657	Self	6/30/98	\$250.00 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Investor Aggregate Year-to-Date: \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JACPAC PO Box 105 Highland Park, IL 60035	NOTE: Above Contribution earmarked through this organization		MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: TOTAL FROM CONDUIT 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
Anita Norman 12 Bernill Farms Lane Hanover, NH 03755		5/5/98	\$250.00 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Retired Aggregate Year-to-Date: \$ 250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20035	NOTE: Above Contribution earmarked through this organization		MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: TOTAL FROM CONDUIT 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
Eric Kessler 512 Elm Avenue Takoma Park, MD 20912	Information requested	6/5/98	\$250.00 *
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation: Best efforts made Aggregate Year-to-Date: \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 20 OF 22

FOR LINE NUMBER 11(A)(1)

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

<p><b>A. Full Name, Mailing Address and ZIP Code</b> League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> NOTE: Above Contribution earmarked through this organization</p> <p>Occupation TOTAL FROM CONDUIT</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p>	<p><b>Amount of Each Receipt this Period</b> MEMO \$250.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Russell E. Train 1801 Kalorama Square, NW Washington, DC 20008</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> Information requested</p> <p>Occupation Best efforts made</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>5/5/98</p> <p>\$1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> League of Conservation Voters 1707 L Street, NW Suite 750 Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> NOTE: Above Contribution earmarked through this organization</p> <p>Occupation TOTAL FROM CONDUIT</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p>	<p><b>Amount of Each Receipt this Period</b> MEMO \$1,000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Yiannakis Zacharia 1071 Ulster Avenue East Kingston, NY 12401</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> Lexus Diner</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>4/4/98</p> <p>\$400.00</p>	<p><b>Amount of Each Receipt this Period</b> \$400.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Craig Kaplan 214 East 18th Street New York, NY 10003</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b> Self</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>4/22/98</p> <p>\$1,000.00</p>	<p><b>Amount of Each Receipt this Period</b> \$1,000.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p>	<p><b>Amount of Each Receipt this Period</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p>	<p><b>Amount of Each Receipt this Period</b></p>

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

**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

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

FRIENDS OF MAURICE HINCHAY COO 272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>4/21/98</u>	<u>MEMO TOTAL FROM CONDUIT \$3,763.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>4/30/98</u>	<u>MEMO TOTAL FROM CONDUIT \$2,090.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>5/5/98</u>	<u>MEMO TOTAL FROM CONDUIT \$3,025.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>5/15/98</u>	<u>MEMO TOTAL FROM CONDUIT \$2,035.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>5/23/98</u>	<u>MEMO TOTAL FROM CONDUIT \$730.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>5/29/98</u>	<u>MEMO TOTAL FROM CONDUIT \$1,830.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<u>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</u>		<u>6/10/98</u>	<u>MEMO TOTAL FROM CONDUIT \$1,290.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

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

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FOR LINE NUMBER 11(A)(1)

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NAME OF COMMITTEE (in Full)

*FRIENDS OF MAURICE HINCHY C00272633*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</i>		<i>6/19/98</i>	<i>MEMO TOTAL FROM CONDUIT 606.00</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>LEAGUE OF CONSERVATION VOTERS 1707 L STREET, NW, STE. 750 WASHINGTON, DC 20036</i>		<i>6/30/98</i>	<i>MEMO TOTAL FROM CONDUIT 900.00</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
<i>SACPA PO BOX 105 HIGHLAND PARK, IL 60035</i>		<i>6/30/98</i>	<i>MEMO TOTAL FROM CONDUIT 700.00</i>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

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

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

*\$ 57,555.00*

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

11(b)

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NAME OF COMMITTEE (in Full)

FRIENDS OF MAURICE HINCHAY 000272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DCCC 430 SOUTH CAPITOL STREET WASHINGTON, DC 20003		5/30/98	\$9.76 IN KIND
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	9.76	
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 > \$		
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 > \$		
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 > \$		
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 > \$		
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 > \$		
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 > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$9.76

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 1 OF 8  
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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey C00272639

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SSL PAC 11 East 86th Street New York, NY 10028		6/3/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	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
ACB-COMPAC 900 19th Street, NW Suite 400 Washington, DC 20006		5/8/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFA FLIGHT PAC 1625 Massachusetts Avenue, NW Washington, DC 20036		6/23/98 6/6/98	\$500.00 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFSCME 1625 L Street, NW Washington, DC 20036		4/16/98	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$5,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANA-PAC 600 Maryland Avenue, SW Suite 100 West Washington, DC 200242571		6/30/98	\$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATLA PAC 1050 - 31st Street, NW Washington, DC 20007		4/23/98	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ACRE 4301 Wilson Boulevard Arlington, VA 222031860		4/8/98 5/30/98	\$500.00 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date	\$	\$1,500.00

SUBTOTAL of Receipts This Page (optional)

\$15,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey CD0272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
AFT (COPE) 555 New Jersey Avenue, NW Washington, DC 200012079		6/30/98	\$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,500.00
B. Full Name, Mailing Address and ZIP Code American Maritime Officers, AFL-CIO 650 4th Avenue Brooklyn, NY 11232		4/23/98 6/30/98	\$500.00 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,500.00
C. Full Name, Mailing Address and ZIP Code Amer. Podiatric Med. Assoc. 9312 Old Georgetown Road Bethesda, MD 208141696		6/30/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
D. Full Name, Mailing Address and ZIP Code ASLH-PAC 10801Rockville Pike Rockville, MD 20852		6/22/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Appraisal Institute PAC 2600 Virginia Avenue, NW Suite 200 Washington, DC 20037		5/14/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
F. Full Name, Mailing Address and ZIP Code CULAC 605 15th Street NW Suite 300 Washington, DC 200052207		4/17/98 5/13/98	\$2,589.82 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$3,090.00
G. Full Name, Mailing Address and ZIP Code PAC WNYRC 335 Main Street Johnson City, NY 137902091		5/27/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$22,338.62

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

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Contributions from Other Political Committees

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**NAME OF COMMITTEE (In Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ENGPAC 1234 5th Street, #204 Santa Monica, CA 90401		5/6/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Farm Credit PAC 50 F Street, NW Suite 900 Washington, DC 20001		6/30/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Friends of Rosa DeLauro 49 Huntington Street New Haven, CT 06511		6/22/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Human Rights Campaign Fund PAC 1101 14th Street, NW Suite 200 Washington, DC 20005		6/30/98	\$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$2,500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I.B.E.W. Local 325 24 Emma Street Binghamton, NY 13905		5/19/98	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IJOE Local 545 (PAF) 4325 S. Salina Street Syracuse, NY 13205		6/30/98	\$2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IBPAC One Thomas Circle, NW Suite 400 Washington, DC 20005		4/23/98 6/30/98	\$500.00 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,500.00

SUBTOTAL of Receipts This Page (optional) ..... \$31,339.62

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laborers' Political League 905-18th Street, NW Washington, DC 20006		4/14/98	\$2,250.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$2,250.00	
B. Full Name, Mailing Address and ZIP Code Lockheed Martin Employees PAC 1725 Jefferson Davis Highway Crystal Square Two, Suite 300 Arlington, VA 22202		5/14/98	\$500.00
	Occupation	6/30/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$2,000.00	
C. Full Name, Mailing Address and ZIP Code MEBA-PAF 444 N. Capitol Street, NW Suite 800 Washington, DC 20001		5/6/98	\$500.00
	Occupation	5/27/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Mechinista Non-Partisan PL 9000 Machinist Place Upper Marlboro, MD 20772		6/30/98	\$1,000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$3,500.00	
E. Full Name, Mailing Address and ZIP Code Manufactured Housing Institute PAC 2101 Wilson Blvd. Suite 810 Arlington, VA 22201-8062		4/23/96	\$500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
F. Full Name, Mailing Address and ZIP Code MORPAC 1125 15th Street, NW Suite 800 Washington, DC 20005		4/23/98	\$500.00
	Occupation	7/3/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code NAPUS PAC 8 Herbert Street Alexandria, VA 22305-2600		6/1/98	\$1,000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$	\$2,000.00	

**SUBTOTAL of Receipts This Page (optional)** ..... \$39,089.62

**TOTAL This Period (last page this line number only)** ..... \$39,089.62

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code NARAL-PAC 1156 15th Street, NW Suite 700 Washington, DC 20005	Name of Employer  Occupation	Date (month, day, year) 4/23/98 6/30/98	Amount of Each Receipt this Period \$1,500.00 \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code NARFE-PAC 806 N. Washington Street Alexandria, VA 22314	Name of Employer  Occupation	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code NATCA PAC 1150 17th Street, NW Suite 701 Washington, DC 20038	Name of Employer  Occupation	Date (month, day, year) 4/23/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 500.00	
D. Full Name, Mailing Address and ZIP Code NY ChoicePAC II 1202 Lexington Avenue Box 248 New York, NY 10028	Name of Employer  Occupation	Date (month, day, year) 8/1/98	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code NCPSSM-PAC 10 G Street, Suite 600 Washington, DC 200024215	Name of Employer  Occupation	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code UNITE 1710 Broadway New York, NY 10019	Name of Employer  Occupation	Date (month, day, year) 5/27/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 500.00	
G. Full Name, Mailing Address and ZIP Code PMA PAC 1755 Jefferson Davis Highway 1107 Arlington, VA 22202	Name of Employer  Occupation	Date (month, day, year) 4/23/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 500.00	

**SUBTOTAL of Receipts This Page (optional)** ..... \$48,089.82

**TOTAL This Period (last page this line number only)** ..... \$48,089.82

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Stark Re-Election Comm. PO Box 121 Hayward, CA 94543		4/29/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code AAP/PLAN PO Box 38129 Colorado Springs, CO 80937		6/20/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
C. Full Name, Mailing Address and ZIP Code Re-Elect Congressman Joe Moakley Comm. 99 Summer Street Suite 1250 Boston, MA 02110		6/30/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code SEIU COPE FUND PCC 1313 L Street, NW Washington, DC 20005		4/23/98 8/21/98	\$2,000.00 \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$3,000.00
E. Full Name, Mailing Address and ZIP Code Sierra Club PC 408 G Street, NE Washington, DC 20002		6/30/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
F. Full Name, Mailing Address and ZIP Code Teamsters - Local 445 PO Box 2097 Newburgh, NY 12550		5/15/98	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$5,000.00
G. Full Name, Mailing Address and ZIP Code Transportation PEL 14800 Detroit Avenue Cleveland, OH 44107		5/22/98	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$5,000.00

**SUBTOTAL of Receipts This Page (optional)** ..... \$62,089.62

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

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**NAME OF COMMITTEE (in full)**

Friends of Maurice Hinchey C00272633

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Treasury Employees PAC 901 E Street, NW Suite 600 Washington, DC 20004		5/6/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
B. Full Name, Mailing Address and ZIP Code IAAW V GAP 1757 N Street, NW Washington, DC 20036		4/23/98 6/8/98	\$500.00 \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code United Food & Commercial Workers ABC 1775 K Street, NW Washington, DC 20006-1598		4/8/98	\$4,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$4,500.00
D. Full Name, Mailing Address and ZIP Code DEPAC 3253 E. Chestnut Expressway Springfield, MO 65802		6/8/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
E. Full Name, Mailing Address and ZIP Code ATFL/LC PAC 2213 M Street NW 3rd Floor Washington, DC 20037		5/6/98	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code ALPA-PAC 1825 Massachusetts Avenue, NW Washington, DC 20036		5/27/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$500.00
G. Full Name, Mailing Address and ZIP Code Parsons Brinckerhoff, Inc. PAC One Penn Plaza New York, NY 10119		6/1/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$70,839.62

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 8 OF 8  
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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey CD0272633

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Barney Frank for Congress Committee PO Box 280 Newtonville, MA 02180</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>5/22/98</p> <p>\$1,000.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> NYSE - PAC 1800 K Street, NW, #1100 Washington, DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>6/21/98</p> <p>\$500.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> ILOE Local 137 1360 Pleasantville Road Briarcliff Manor, NY 10510</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>6/30/98</p> <p>\$100.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$100.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> ADA-PAC 1625 K Street, NW Suite 210 Washington, DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>6/30/98</p> <p>\$1,000.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Planned Parenthood PAC 810 Seventh Avenue New York, NY 10019</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>6/30/98</p> <p>\$2,500.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$2,500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Lone Star Fund PO Box 4219 Dallas, TX 75208</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>6/30/98</p> <p>\$500.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Elect For Animals 1832 Wisconsin Avenue, NW Suite 23 Washington, DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p><b>Name of Employer</b></p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p><b>Date (month, day, year)</b></p> <p>4/28/98</p> <p>\$250.00</p>	<p><b>Amount of Each Receipt this Period</b></p> <p>\$250.00</p>

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

\$76,888.62

**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

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Other Receipts

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**NAME OF COMMITTEE (in Full)**

Friends of Maurice Hinchey C00272533

A. Full Name, Mailing Address and ZIP Code Fleet Bank Washington Avenue Kingston, NY 12401	Name of Employer  Occupation	Date (month, day, year)  4/30/88	Amount of Each Receipt this Period  \$121.51
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>INTEREST</b>		Aggregate Year-to-Date \$ 856.00	
B. Full Name, Mailing Address and ZIP Code Fleet Bank Washington Avenue Kingston, NY 12401	Name of Employer  Occupation	Date (month, day, year)  5/29/88	Amount of Each Receipt this Period  \$179.80
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>INTEREST</b>		Aggregate Year-to-Date \$ 859.00	
C. Full Name, Mailing Address and ZIP Code Fleet Bank Washington Avenue Kingston, NY 12401	Name of Employer  Occupation	Date (month, day, year)  6/30/88	Amount of Each Receipt this Period  \$242.89
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <b>INTEREST</b>		Aggregate Year-to-Date \$ 859.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):		Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):		Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):		Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):		Aggregate Year-to-Date \$	

**SUBTOTAL** of Receipts This Page (optional) ..... \$544.30

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full) **FRIENDS OF MAURICE HINCHEY** C **00272633**

<p>A. Full Name, Mailing Address and ZIP Code  <b>AT&amp;T Business Service</b>  <b>P.O. Box 371302</b>  <b>Pittsburgh, PA 15250</b></p>	<p>Purpose of Disbursement  <b>Telephone</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>04/06/98</b></p>	<p>Amount of Each Disbursement This Period  <b>72.08</b></p>
<p>B. Full Name, Mailing Address and ZIP Code  <b>AT&amp;T Business Service</b>  <b>P.O. Box 371302</b>  <b>Pittsburgh, PA 15250</b></p>	<p>Purpose of Disbursement  <b>Telephone</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>04/23/98</b></p>	<p>Amount of Each Disbursement This Period  <b>122.97</b></p>
<p>C. Full Name, Mailing Address and ZIP Code  <b>AT&amp;T Business Service</b>  <b>P.O. Box 371302</b>  <b>Pittsburgh, PA 15250</b></p>	<p>Purpose of Disbursement  <b>Telephone</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>05/23/98</b></p>	<p>Amount of Each Disbursement This Period  <b>168.71</b></p>
<p>D. Full Name, Mailing Address and ZIP Code  <b>AT&amp;T Business Service</b>  <b>P.O. Box 371302</b>  <b>Pittsburgh, PA 15250</b></p>	<p>Purpose of Disbursement  <b>Telephone</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>06/20/98</b></p>	<p>Amount of Each Disbursement This Period  <b>115.58</b></p>
<p>E. Full Name, Mailing Address and ZIP Code  <b>Abacus Associates</b>  <b>52 School Street</b>  <b>Hatfield, MA 01038</b></p>	<p>Purpose of Disbursement  <b>Campaign Consultant</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>04/23/98</b></p>	<p>Amount of Each Disbursement This Period  <b>10184.00</b></p>
<p>F. Full Name, Mailing Address and ZIP Code  <b>Abacus Associates</b>  <b>52 School Street</b>  <b>Hatfield, MA 01038</b></p>	<p>Purpose of Disbursement  <b>Campaign Consultant</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>06/20/98</b></p>	<p>Amount of Each Disbursement This Period  <b>728.38</b></p>
<p>G. Full Name, Mailing Address and ZIP Code  <b>Advanced Micro Computers Inc.</b>  <b>1490 Route 208</b>  <b>Walkkill, NY 12589</b></p>	<p>Purpose of Disbursement  <b>Office Equipment</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>06/20/98</b></p>	<p>Amount of Each Disbursement This Period  <b>2153.92</b></p>
<p>H. Full Name, Mailing Address and ZIP Code  <b>American Printing &amp; Office</b>  <b>562 Broadway</b>  <b>Kingston, NY 12401</b></p>	<p>Purpose of Disbursement  <b>Office Supplies</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>04/06/98</b></p>	<p>Amount of Each Disbursement This Period  <b>76.29</b></p>
<p>I. Full Name, Mailing Address and ZIP Code  <b>American Printing &amp; Office</b>  <b>562 Broadway</b>  <b>Kingston, NY 12401</b></p>	<p>Purpose of Disbursement  <b>Printing</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <b>05/07/98</b></p>	<p>Amount of Each Disbursement This Period  <b>42.25</b></p>

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 12  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)** **FRIENDS OF MAURICE HINCHEY** **C 00272633**

<p><b>A. Full Name, Mailing Address and ZIP Code</b> American Printing &amp; Office 562 Broadway Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Printing</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/11/98</p>	<p><b>Amount of Each Disbursement This Period</b> 171.84</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> American Printing &amp; Office 562 Broadway Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Printing</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/20/98</p>	<p><b>Amount of Each Disbursement This Period</b> 380.26</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Bell Atlantic/Nynex P.O.Box 15124 Albany, NY 12250</p>	<p><b>Purpose of Disbursement</b> Telephone</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/06/98</p>	<p><b>Amount of Each Disbursement This Period</b> 115.34</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Bell Atlantic/Nynex P.O.Box 15124 Albany, NY 12250</p>	<p><b>Purpose of Disbursement</b> Telephone</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/01/98</p>	<p><b>Amount of Each Disbursement This Period</b> 108.95</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Bell Atlantic/Nynex P.O.Box 15124 Albany, NY 12250</p>	<p><b>Purpose of Disbursement</b> Telephone</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/20/98</p>	<p><b>Amount of Each Disbursement This Period</b> 172.26</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/22/98</p>	<p><b>Amount of Each Disbursement This Period</b> 157.50</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/29/98</p>	<p><b>Amount of Each Disbursement This Period</b> 145.45</p>
<p><b>H. Full Name, Mailing Address and ZIP Code</b> Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/08/98</p>	<p><b>Amount of Each Disbursement This Period</b> 180.08</p>
<p><b>I. Full Name, Mailing Address and ZIP Code</b> Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/16/98</p>	<p><b>Amount of Each Disbursement This Period</b> 255.00</p>

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

**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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS OF MAURICE HINCHEY

C 00272633

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	177.03
Brill, Lisa Baker 1501 High Falls Road Catskill, NY 12414	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/98	287.16
Broome County Democratic Comm. PO Box 854 89 Court Street Binghamton, NY 13902	Constituent Contact Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/98	50.00
Campaign Finance Consultants 236 Mass. Ave. NE Suite 202 Washington, DC 20002	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/08/98	3924.30
Campaign Finance Consultants 236 Mass. Ave. NE Suite 202 Washington, DC 20002	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/98	4001.81
Cantrell/Cutter Printing 1789 Olive Street Capitol Heights, MD 20743	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/08/98	360.61
Catskill Art & Office Supply 114-118 Smith St. Kingston, NY 12401	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/08/98	68.96
Catskill Art & Office Supply 114-118 Smith St. Poughkeepsie, NY 12601	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/98	57.84
DCCC 430 SOUTH CAPITOL STREET WASHINGTON, DC 20003	FUND RAISING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/30/98	9.76 IN-KIND

SUBTOTAL of Disbursements This Page (optional)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Collmor Inc. 270 Fair Street Kingston, NY 12401	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	200.00
B. Full Name, Mailing Address and ZIP Code Crouse & Malchow Inc. 1400 I St. NW, Suite 650 Washington, DC 20005	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/23/98	2000.00
C. Full Name, Mailing Address and ZIP Code Dae Levine Group 525 West 49th St. - #6G New York, NY 10019	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/98	251.87
D. Full Name, Mailing Address and ZIP Code Dae Levine Group 525 West 49th St. - #6G New York, NY 10019	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/07/98	1500.00
E. Full Name, Mailing Address and ZIP Code Dae Levine Group 525 West 49th St. - #6G New York, NY 10019	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/20/98	579.27
F. Full Name, Mailing Address and ZIP Code David L. Andrukitis Inc. Printing & Mailing Services 50 E Street, SE Washington, DC 20003	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/98	171.84
G. Full Name, Mailing Address and ZIP Code Dixon Media Group 1640 21st St. NW Suite One Washington, DC 20009	Campaign Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/23/98	3035.00
H. Full Name, Mailing Address and ZIP Code Dot's Diner 275 Fair Street Kingston, NY 12401	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/98	365.08
I. Full Name, Mailing Address and ZIP Code Finest Quality Products 18 Rock City Road Woodstock, NY 12498	Campaign Buttons Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/19/98	155.80

SUBTOTAL of Disbursements This Page (optional)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

<p><b>A. Full Name, Mailing Address and ZIP Code</b> First Hudson Valley 800 East Chester By-Pass Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Bank Charges</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/30/98</p>	<p><b>Amount of Each Disbursement This Period</b> 167.40</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Fort Orange Press 11 Sand Creek Road Albany, NY 12201</p>	<p><b>Purpose of Disbursement</b> Printing</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 06/20/98</p>	<p><b>Amount of Each Disbursement This Period</b> 403.72</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/03/98</p>	<p><b>Amount of Each Disbursement This Period</b> 287.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/08/98</p>	<p><b>Amount of Each Disbursement This Period</b> 287.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/15/98</p>	<p><b>Amount of Each Disbursement This Period</b> 376.45</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/23/98</p>	<p><b>Amount of Each Disbursement This Period</b> 375.25</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 04/30/98</p>	<p><b>Amount of Each Disbursement This Period</b> 375.85</p>
<p><b>H. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/07/98</p>	<p><b>Amount of Each Disbursement This Period</b> 375.85</p>
<p><b>I. Full Name, Mailing Address and ZIP Code</b> Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p><b>Purpose of Disbursement</b> Salary</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p><b>Date (month, day, year)</b> 05/15/98</p>	<p><b>Amount of Each Disbursement This Period</b> 375.85</p>

SUBTOTAL of Disbursements This Page (optional)

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

<p>A. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Campaign Travel Mileage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/15/98</p>	<p>Amount of Each Disbursement This Period 146.56</p>
<p>B. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/28/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>C. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/29/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>D. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/05/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>E. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/13/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>F. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/18/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>G. Full Name, Mailing Address and ZIP Code Herl, Susanne 796 Murray Road Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Salary</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/24/98</p>	<p>Amount of Each Disbursement This Period 375.85</p>
<p>H. Full Name, Mailing Address and ZIP Code Hillside Manor 240 Blvd. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Constituent Contact</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 04/03/98</p>	<p>Amount of Each Disbursement This Period 383.50</p>
<p>I. Full Name, Mailing Address and ZIP Code IRS Fleet Bank Hurley Ave. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Wage Withholding Tax</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 04/15/98</p>	<p>Amount of Each Disbursement This Period 706.96</p>

SUBTOTAL of Disbursements This Page (optional)

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)** **FRIENDS OF MAURICE HINCHEY** **C 00272633**

<b>A. Full Name, Mailing Address and ZIP Code</b> IRS Fleet Bank Hurley Ave. Kingston, NY 12401	<b>Purpose of Disbursement</b> Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 05/07/98	<b>Amount of Each Disbursement This Period</b> 659.68
<b>B. Full Name, Mailing Address and ZIP Code</b> IRS Fleet Bank Hurley Ave. Kingston, NY 12401	<b>Purpose of Disbursement</b> Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 06/17/98	<b>Amount of Each Disbursement This Period</b> 800.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Kingswood Equities 1010 Northern Blvd Great Neck, NY 11021	<b>Purpose of Disbursement</b> Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 04/08/98	<b>Amount of Each Disbursement This Period</b> 255.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Kingswood Equities 1010 Northern Blvd. Great Neck, NY 11021	<b>Purpose of Disbursement</b> Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 05/01/98	<b>Amount of Each Disbursement This Period</b> 255.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Kingswood Equities 1010 Northern Blvd. Great Neck, NY 11021	<b>Purpose of Disbursement</b> Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 06/20/98	<b>Amount of Each Disbursement This Period</b> 255.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Landi, Bonnie 20 Arlmont St. Kingston, NY 12401	<b>Purpose of Disbursement</b> Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 04/15/98	<b>Amount of Each Disbursement This Period</b> 357.98
<b>G. Full Name, Mailing Address and ZIP Code</b> Landi, Bonnie 20 Arlmont St. Kingston, NY 12401	<b>Purpose of Disbursement</b> Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 04/30/98	<b>Amount of Each Disbursement This Period</b> 264.58
<b>H. Full Name, Mailing Address and ZIP Code</b> Landi, Bonnie 20 Arlmont St. Kingston, NY 12401	<b>Purpose of Disbursement</b> Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 05/11/98	<b>Amount of Each Disbursement This Period</b> 197.14
<b>I. Full Name, Mailing Address and ZIP Code</b> Landi, Bonnie 20 Arlmont St. Kingston, NY 12401	<b>Purpose of Disbursement</b> Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Date (month, day, year)</b> 05/29/98	<b>Amount of Each Disbursement This Period</b> 228.28

<b>SUBTOTAL of Disbursements This Page (optional)</b> .....	
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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Landi, Bonnie 20 Arimont St. Kingston, NY 12401	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/28/98	212.70
B. Full Name, Mailing Address and ZIP Code CULAC 805 FIFTEENTH ST., NW SUITE 300 WASHINGTON, DC 20005-2207	Purpose of Disbursement Fund raising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/98	\$2,589.62 in-kind
C. Full Name, Mailing Address and ZIP Code Michael Culotta 303 Meadow Wood Terrace Ithaca, NY 14850	Purpose of Disbursement Vol. Party Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/13/98	248.79
D. Full Name, Mailing Address and ZIP Code NGP Software Inc. 5440 Nevada Avenue NW Washington, DC 20051	Purpose of Disbursement Computer Software Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/23/98	1500.00
E. Full Name, Mailing Address and ZIP Code NYS Income Tax W.A.Harriman Campus Albany, NY 12227-0134	Purpose of Disbursement Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/98	88.75
F. Full Name, Mailing Address and ZIP Code NYS Income Tax W.A.Harriman Campus Albany, NY 12227-0134	Purpose of Disbursement Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/98	180.74
G. Full Name, Mailing Address and ZIP Code NYS Income Tax W.A.Harriman Campus Albany, NY 12227-0134	Purpose of Disbursement Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/07/98	136.01
H. Full Name, Mailing Address and ZIP Code NYS Income Tax W.A.Harriman Campus Albany, NY 12227-0134	Purpose of Disbursement Wage Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/20/98	120.80
I. Full Name, Mailing Address and ZIP Code NYS Unemployment Insurance P.O.Box 15012 Albany, NY 12212	Purpose of Disbursement Unemployment Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/30/98	251.64

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

<p><b>A. Full Name, Mailing Address and ZIP Code</b> National Democratic Club 30 Ivy Street Washington, DC 20003</p>	<p>Purpose of Disbursement <b>Catering</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>04/06/98</b></p>	<p>Amount of Each Disbursement This Period <b>682.06</b></p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> National Democratic Club 30 Ivy Street Washington, DC 20003</p>	<p>Purpose of Disbursement <b>Catering</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>05/11/98</b></p>	<p>Amount of Each Disbursement This Period <b>605.48</b></p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>04/08/98</b></p>	<p>Amount of Each Disbursement This Period <b>32.00</b></p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>04/23/98</b></p>	<p>Amount of Each Disbursement This Period <b>200.00</b></p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>04/23/98</b></p>	<p>Amount of Each Disbursement This Period <b>29.00</b></p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>05/11/98</b></p>	<p>Amount of Each Disbursement This Period <b>120.00</b></p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>05/21/98</b></p>	<p>Amount of Each Disbursement This Period <b>816.00</b></p>
<p><b>H. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>05/28/98</b></p>	<p>Amount of Each Disbursement This Period <b>256.00</b></p>
<p><b>I. Full Name, Mailing Address and ZIP Code</b> Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement <b>Postage</b></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) <b>06/10/98</b></p>	<p>Amount of Each Disbursement This Period <b>32.00</b></p>

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

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

<p>A. Full Name, Mailing Address and ZIP Code Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement Postage</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/24/98</p>	<p>Amount of Each Disbursement This Period 416.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Postmaster 50 Main St. Kingston, NY 12401</p>	<p>Purpose of Disbursement Postage</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/29/98</p>	<p>Amount of Each Disbursement This Period 1600.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Rondout Floral 89 Broadway Kingston, NY 12401</p>	<p>Purpose of Disbursement Constituent Contact</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 04/08/98</p>	<p>Amount of Each Disbursement This Period 53.88</p>
<p>D. Full Name, Mailing Address and ZIP Code Rondout Floral 89 Broadway Kingston, NY 12401</p>	<p>Purpose of Disbursement Constituent Contact</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/20/98</p>	<p>Amount of Each Disbursement This Period 53.88</p>
<p>E. Full Name, Mailing Address and ZIP Code Staples The Office Superstore 1399 Ulster Avenue Kingston, NY 12401</p>	<p>Purpose of Disbursement Office Supplies</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/28/98</p>	<p>Amount of Each Disbursement This Period 547.73</p>
<p>F. Full Name, Mailing Address and ZIP Code Staples The Office Superstore 1399 Ulster Avenue Kingston, NY 12401</p>	<p>Purpose of Disbursement Office Supplies</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/28/98</p>	<p>Amount of Each Disbursement This Period 8.62</p>
<p>G. Full Name, Mailing Address and ZIP Code Staples The Office Superstore 1399 Ulster Avenue Kingston, NY 12401</p>	<p>Purpose of Disbursement Office Supplies</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 05/30/98</p>	<p>Amount of Each Disbursement This Period 37.71</p>
<p>H. Full Name, Mailing Address and ZIP Code Staples The Office Superstore 1399 Ulster Avenue Kingston, NY 12401</p>	<p>Purpose of Disbursement Office Supplies</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 06/11/98</p>	<p>Amount of Each Disbursement This Period 31.19</p>
<p>I. Full Name, Mailing Address and ZIP Code State Insurance Fund GPO BOX 5381 New York, NY 10087</p>	<p>Purpose of Disbursement Employee Benefits</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 04/08/98</p>	<p>Amount of Each Disbursement This Period 422.81</p>

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MAURICE HINCHEY**

**C 00272633**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sun Valley Printing 82 Castle Creek Rd. Binghamton, NY 13901	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/98	1400.25
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P.O.Box 4980 Hagerstown, MD 21747	Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/08/98	30.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P.O.Box 4980 Hagerstown, MD 21747	Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/98	12.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P.O.Box 4980 Hagerstown, MD 21747	Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/11/98	12.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P.O.Box 4980 Hagerstown, MD 21747	Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/23/98	146.47
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
UPS P.O.Box 4980 Hagerstown, MD 21747	Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/20/98	99.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wellcare of New York P.O.Box 4435 Kingston, NY 12401	Employee Benefits Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/08/98	454.86
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wellcare of New York P.O.Box 4435 Kingston, NY 12401	Employee Benefit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/23/98	454.86

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full) **FRIENDS OF MAURICE HINCHEY** C 00272633

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wellcare of New York P.O.Box 4435 Kingston, NY 12401	Employee Benefits Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/23/98	454.86
Wellcare of New York P.O.Box 4435 Kingston, NY 12401	Employee Benefits Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/20/98	454.86
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)	
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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 20(a)

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)

*FRIENDS OF MAURICE HINCHAY 000272633*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>LEONARD BLAVATNIK 1009 PARK AVENUE, #5A NEW YORK, NY 10028-0936</i>	<i>CONTRIBUTION REFUND</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/8/98</i>	<i>\$500.00</i>
<i>CAROL RAY PO BOX 5714 STATELINE, NV 89449</i>	<i>CONTRIBUTION REFUND</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/8/98</i>	<i>\$100.00</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) .....

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

*\$600.00*

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full) **FRIENDS OF MAURICE HINCHEY C 00272633**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. TREASURY C/O FEDERAL ELECTIONS COMMISSION 444 E STREET, NW WASHINGTON, DC 20463	DISBURSEMENT OF CONTRIBUTIONS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/8/98	\$ 27,000.00
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)	
TOTAL This Period (last page this line number only)	\$ 27,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/15/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>gpc</i>	 7/18/98
PREPARER	DATE PREPARED