

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
PETE KING FOR CONGRESS COMMITTEE

ADDRESS (number and street) Check if different than previously reported.
Box 1828

CITY, STATE and ZIP CODE
SEAFORD, N.Y. 11783

STATE/DISTRICT
NY/3

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00272211

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on **10/2/98** in the State of **NY**
- Termination Report
- This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/16/98 through 11/23/98		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	55,718.00	142,840.00
(b) Total Contribution Refunds (from Line 20(d))	0	3,600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	55,718.00	139,240.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	78,144.51	174,482.26
(b) Total Offsets to Operating Expenditures (from Line 14)	500.00	732.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	77,644.51	173,750.26
8. Cash on Hand at Close of Reporting Period (from Line 27)	308,633.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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

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
EUGENE TURNER

Signature of Treasurer
Eugene Turner

Date
11/3/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In Full)	Report Covering the Period:	
PETE KING FOR CONGRESS COMMITTEE	From: 10/16/98	To: 11/23/98
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	15,475.00	
(ii) Unitemized	5,243.00	
(iii) Total of contributions from individuals	20,718.00	142,840.00
(b) Political Party Committees	0.00	0
(c) Other Political Committees (such as PACs)	31,500.00	183,962.00
(d) The Candidate	0.00	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	55,218.00	326,802.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0	0
(b) All Other Loans	0	0
(c) TOTAL LOANS (add 13(a) and (b))	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	500.00	732.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	55,718.00	327,534.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	78,144.51	174,482.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	2300.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	1300.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0	3600.00
21. OTHER DISBURSEMENTS	250.00	20,749.91
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	78,394.51	198,832.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 331,310.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 55,718.00
25. SUBTOTAL (add Line 23 and Line 24)	\$ 387,028.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 78,394.51
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 308,633.98

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vincent Amato 1293 Dale Court Seaford NY 11783	Brown Brothers Harriman .C.	10/28/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Tax Advisor	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
Harvinder Anand 55 Wildwood Drive Laurel Hollow NY 11791	<i>self-employed</i>	10/23/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Ceo	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
Chris Aspinall 224-34 76th Avenue Bayside NY 11364	North Shore U. Hospital	10/28/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auditor	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
Francis Blessing 234 E 53rd St New York NY 10022		10/24/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$510.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold J Boening 91 Fairfax Rd Massapequa NY 11758	Boening Bros. Inc.	10/28/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chief Exec officer	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
John Christiansen 3594 Nimrod Street Seaford NY 11783	Town Of Hempstead	10/30/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Kennel Supervisor	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
John P Cleary 20 Cove Woods Rd Oyster Bay NY 11771	Farrell, Fritz	10/30/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$450.00	

SUBTOTAL of Receipts This Page (optional)

\$1,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 8
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Crowe 97 Elder Road Islip NY 11751	Lilly Flanagan's	10/21/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		Aggregate Year-to-Date > \$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cunningham & Cunningham, LLP 22 Jericho Turnpike Mineola NY 11501	Partnership; see attribution below	10/21/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		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
Gerard Cunningham 22 Jericho Turnpike Mineola NY 11501	Cunningham & Cunningham Llp	10/21/98	\$500.00 Memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		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
Brian Cunningham 22 Jericho Turnpike Mineola NY 11501	Cunningham & Cunningham Llp	10/21/98	\$500.00 Memo
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		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
Michael D'Auria 30 Rolling Dr Glen Head NY 11545		11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		Aggregate Year-to-Date = \$450.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fay Devlin 532 W 30Th Street New York NY 10001	Eurotech	10/28/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		Aggregate Year-to-Date > \$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. Robert Donaldson 33 Madder Lake Circle Commack NY 11725	Donaldson Accountants	11/03/98	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT		Aggregate Year-to-Date > \$300.00

SUBTOTAL of Receipts This Page (optional) \$3,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 8
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Donovan 16 East John Street Hicksville NY 11801	Donovan's Investigation Bureau	10/28/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$1,200.00	
Thomas P Dougherty 9 McKenna Ave Baldwin NY 11510	self employed	10/28/98	\$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$350.00	
Thomas Douglas Jr. 26 Cedar Shore Drive Massapequa NY 11758	Cullen & Dykman	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$300.00	
George L Engelke 83 Chelsea Rd Garden City NY 11530	Astoria Federal Savings	10/30/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date > \$900.00	
John G Fallon 68 Carlton Ter Stewart Manor NY 11530	Nassau County Police De	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Police Lieutenant	Aggregate Year-to-Date > \$550.00	
Victor Fusco 890 Warner Road Valley Stream NY 11580	<i>self employed</i>	10/30/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	Aggregate Year-to-Date > \$250.00	
Martin Galvin 338 E 236Th Street Bronx NY 10470	<i>self employed</i>	10/21/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	Aggregate Year-to-Date > \$250.00	

SUBTOTAL of Receipts This Page (optional)

\$1,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 8
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Olive Graham 532 W 30th Street New York NY 10001	Eurotech	10/28/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Treasurer	Aggregate Year-to-Date > \$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Grennan 53 Fairview Road West Massapequa NY 11758	<i>Fish, Holtzman, Tannenbaum & Curcio</i>	10/21/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Attorney</i>	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
Sidney Halpern 6 Mansion Drive Glen Cove NY 11542	The Marsid Group	10/28/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President & CEO	Aggregate Year-to-Date > \$400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alice C Hoshino 3962 Alken Ave Seaford NY 11783		10/28/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. William Johnson 10 Glen Head Road Glen Head NY 11545	First National Bank of ng Island	10/30/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	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
Joseph King 4044 Darby Lane Seaford NY 11783		10/21/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Leviton 1312 Club Dr Hewlett NY 11557	Leviton Manf. Co. Inc.	10/30/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$225.00	

SUBTOTAL of Receipts This Page (optional)

\$2,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 8
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David S. Mack 370 W Passaic Street Rochelle Park NJ 07662	<i>self-employed</i>	10/30/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>Real estate developer</i>	Aggregate Year-to-Date > \$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Margiotta 599 Jerusalem Avenue Uniondale NY 11553	Margiotta & Ricigliano	10/28/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$325.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael McDonald 2459 Lefferts Place Bellmore NY 11710	<i>info requested</i>	11/03/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Edward McGann 42 Roosevelt Place Island Park NY 11558		11/03/98	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean McLoughlin 27 Briaroot Drive Smithtown NY 11787		10/28/98	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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
Charles Milone 1270 Allen Drive Seaford NY 11783	Nassau County	10/21/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Electrical Supervisor	Aggregate Year-to-Date > \$350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Brendan Murray 532 West 30th Street New York NY 10001	Newport Printing	11/03/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Contractor	Aggregate Year-to-Date > \$1,250.00	<i>excess contribution requested</i>

SUBTOTAL of Receipts This Page (optional)	\$2,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **6** OF **8**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Ninnivaggi 1281 Alken Avenue Seaford NY 11783	Town Of Hempstead	10/18/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Deputy Commissioner		Aggregate Year-to-Date > \$350.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Nova 229 Allen Street Lawrence NY 11559	Town Of Hempstead	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Department Of Parks		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
Tricia O'Neil 29 Hill Pond Road Port Washington NY 11050	Port Washington Police pt.	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Law Enforcement		Aggregate Year-to-Date > \$275.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol O'Rourke 1225 Franklin Ave Garden City NY 11530	Colleran, O'Hara & Mill	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$1,500.00 <i>By issue contribution refunded</i>
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Antonio J Patino 2136 Seamans Neck Rd Seaford NY 11783	Local #3 Afl-Cio	11/03/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Union President		Aggregate Year-to-Date > \$450.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Rattigan 39 W 4Th St Hazleton PA 18201		10/28/98 11/03/98	\$50.00 \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		Aggregate Year-to-Date > \$425.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter F Rooney 9 Pickwick Rd Manhasset NY 11030	self employed	11/02/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$350.00

SUBTOTAL of Receipts This Page (optional)

\$775.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 8
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harismran Sabharwal 15 Maria Lane Old Brookville NY 11545 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	self-employed Occupation Engineer Aggregate Year-to-Date > \$500.00	10/23/98	\$500.00
Catherine Saponaro 3531 Naomi Place Seaford NY 11783 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <i>Coral House</i> Occupation <i>Bookkeeper</i> Aggregate Year-to-Date > \$650.00	10/28/98	\$500.00
Peter J Seitz 899 S Oyster Bay Rd Bethpage NY 11714 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bethpage Fed. Credit Un Occupation President & CEO Aggregate Year-to-Date > \$550.00	10/28/98	\$100.00
Gioacchino Spiezio 101 Peninsula Dr Babylon NY 11702 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hicksville Machine Work Occupation Vice President Aggregate Year-to-Date > \$750.00	10/28/98	\$250.00
Martha Anne Thompson 3854 Hudson Ave Seaford NY 11783 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 > \$300.00	11/03/98	\$100.00
Thomas V Walsh 344 Knollwood Ln Seaford NY 11783 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nassau County Occupation Superintendent Aggregate Year-to-Date > \$300.00	10/28/98	\$100.00
Michael White 1635 Washington Avenue Seaford NY 11783 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Town Of Hempstead Occupation Parks Department Aggregate Year-to-Date > \$275.00	10/21/98	\$200.00

SUBTOTAL of Receipts This Page (optional) \$1,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMISED RECEIPTS

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

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

Contributions from Individuals

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

NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Wilczek 738 Sheridan Road Wilmette IL 60091	Gardner, Carton & Dougl.	10/30/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Noel Woods 532 W 30th Street New York NY 10001	Eurotech	10/28/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		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
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)	\$2,000.00
TOTAL This Period (last page this line number only)	\$15,475.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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

NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Bankers Association 1120 Connecticut Ave Suite NW Washington DC 20036		10/30/98	\$5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$7,000.00
B. Full Name, Mailing Address and ZIP Code American Institute of CPAs 1455 Pennsylvania Avenue Washington DC 20004		11/05/98 11/05/98	\$1000.00 \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$3,000.00
C. Full Name, Mailing Address and ZIP Code American Medical PAC 1101 Vermont Avenue, NW Washington DC 20005		10/21/98	\$2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$4,000.00
D. Full Name, Mailing Address and ZIP Code Americans For Free International Trade 112 S West Street Suite 310 Alexandria VA 22314		11/02/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,000.00
E. Full Name, Mailing Address and ZIP Code Bankers Trust New York PAC 130 Liberty Street New York NY 10006		10/21/98	\$2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$2,000.00
F. Full Name, Mailing Address and ZIP Code Build PAC of the National Association of Home Builders 1201 15th Street NW Washington DC 20005-2800		10/30/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,000.00
G. Full Name, Mailing Address and ZIP Code Council of Insurance Agents and Brokers PAC 701 Pennsylvania Ave, NW Suite 7 Washington DC 20004-2608		10/21/98 10/21/98	\$500.00 \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,500.00
SUBTOTAL of Receipts This Page (optional)			\$14,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dealers Election Action Committee of the Nat'l Auto Dealers 8400 Westpark Drive Mc Lean VA 22102 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$2,000.00	11/03/98	\$2000.00
Drive Political Fund 25 Louisiana Ave Suite NW Washington DC 20001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$3,000.00	10/28/98	\$500.00
EDO Corporation PAC 60 E 42Nd Street Suite 5010 New York NY 10165 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$500.00	10/28/98	\$500.00
Electrical Construction PAC 3 Bethesda Metro Cente Bethesda MD 20814-5372 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$2,000.00	10/21/98	\$2000.00
Equitable Life Assurance Society 1290 Avenue Of The Americ New York NY 10104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$1,000.00	10/28/98	\$1000.00
First Union Corporation Employees 1 First Union Center First Union Natl Ban NC 28288 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$500.00	11/03/98	\$500.00
International Union Of Operating 265 W 14Th St New York NY 10011 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$500.00	10/28/98	\$500.00
SUBTOTAL of Receipts This Page (optional)			\$7,000.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marine Fireman's Union Political 240 2nd Street San Francisco CA 94105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Action Fund Occupation PAC Aggregate Year-to-Date > \$500.00	10/28/98	\$500.00
National Beer Wholesalers Association 1100 South Washington St. Alexandria VA 22314 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Association Occupation PAC Aggregate Year-to-date > \$2,000.00	10/21/98	\$1000.00
National Check Cashers Association, Inc. 25 Main Street Hackensack NJ 07602 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Inc. Occupation PAC Aggregate Year-to-Date > \$500.00	10/28/98	\$500.00
National Rural Letter Carriers' Association 1630 Duke Street, 4th Flo Alexandria VA 22314-3465 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Association Occupation PAC Aggregate Year-to-Date > \$500.00	10/21/98	\$500.00
New York Mercantile Exchange PAC 1331 Pennsylvania Ave Suite 550 Washington DC 20004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation PAC Aggregate Year-to-Date > \$1,000.00	11/03/98	\$500.00
New York State Right to Life PAC 41 State St Albany NY 12207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation PAC Aggregate Year-to-Date > \$1,500.00	10/28/98	\$1000.00
Oil Heat Institute Federal PAC 601 Veterans Memorial Hwy Hauppauge NY 11788 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Occupation PAC Aggregate Year-to-Date > \$1,000.00	10/28/98	\$500.00

SUBTOTAL of Receipts This Page (optional) \$4,500.00
 TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors Political Action Committee 430 North Michigan Avenue Chicago IL 60611 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/23/98	\$3000.00
Occupation: PAC		Aggregate Year-to-Date > \$5,500.00	
B. Full Name, Mailing Address and ZIP Code Reliastar Federal PAC 20 Washington Ave Suite S. Minneapolis MN 55401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		11/03/98	\$500.00
Occupation: PAC		Aggregate Year-to-Date > \$500.00	
C. Full Name, Mailing Address and ZIP Code Salomon Smith Barney Holdings Better Government commi 901 15Th Street, NW Suite 320 Washington DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/23/98	\$1000.00
Occupation: PAC		Aggregate Year-to-Date > \$1,000.00	
D. Full Name, Mailing Address and ZIP Code Sheet Metal Workers International 1750 New York Ave Suite NW Washington DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Asso. Pac	10/30/98	\$1500.00
Occupation: PAC		Aggregate Year-to-Date > \$3,500.00	
E. Full Name, Mailing Address and ZIP Code 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 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 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)	\$6,000.00
TOTAL This Period (last page this line number only)	\$31,500.00

SCHEDULE A

ITEMIZED RECEIPTS

Offsets to Operating Expenditures

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NAME OF COMMITTEE (In Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Athanasio Cheliotis 3920 Merrick Road Seaford	Self Employed	11/10/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		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
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)	\$500.00
TOTAL This Period (last page this line number only)	\$500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Operating Expenditures

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NAME OF COMMITTEE (IN FULL)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Massapequa Park NY 11762	postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/23/98 10/27/98	\$19000.00 \$324.70
B. Full Name, Mailing Address and ZIP Code King, Peter 1442 Roth Rd Seaford NY 11783	Purpose of Disbursement tolls, parking Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/98 11/20/98	Amount of Each Disbursement This Period \$115.85 \$84.75
C. Full Name, Mailing Address and ZIP Code Dubliner Restaurant 520 N Capitol St Washington DC	Purpose of Disbursement meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/98	Amount of Each Disbursement This Period \$299.68 Memo
D. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile BOX 15559 Worcester MA 01615	Purpose of Disbursement phone calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/26/98	Amount of Each Disbursement This Period \$206.21
E. Full Name, Mailing Address and ZIP Code American Exprs. Centurion SUITE 0002 American Express IL 60679	Purpose of Disbursement package shipment, meals film, parking Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/98	Amount of Each Disbursement This Period \$5855.08
F. Full Name, Mailing Address and ZIP Code American Exprs. Centurion SUITE 0002 American Express IL 60679	Purpose of Disbursement meals, travel, parking Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/20/98	Amount of Each Disbursement This Period \$2028.92
G. Full Name, Mailing Address and ZIP Code American Express IL 60679	Purpose of Disbursement finance charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/20/98	Amount of Each Disbursement This Period \$70.68 Memo
H. Full Name, Mailing Address and ZIP Code U.S. Air National Airport Washington DC	Purpose of Disbursement plane ticket Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/98	Amount of Each Disbursement This Period \$690.50 Memo
I. Full Name, Mailing Address and ZIP Code Delta Airlines National Airport Washington DC	Purpose of Disbursement plane tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/98	Amount of Each Disbursement This Period \$404.00 Memo
SUBTOTAL of Disbursements This Page (optional)			\$27,615.51
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 6
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Compusa 5901 Stevenson Ave Alexandria VA 22304	printer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/98	\$608.60
Compusa 5901 Stevenson Ave Alexandria VA 22304	stickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/16/98	\$28.19 Misc
Capitol Hill Club 300 1st St Washington DC 20003	constit. meals Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/98	\$36.01
Capitol Hill Club 300 1st St Washington DC 20003	food Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/16/98	\$10.05
Congressional Club 2001 NW New Hampshire Ave Washington DC 20009	dues Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/10/98	\$100.00
Petty Cash	miscellaneous Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/98	\$200.00
Irish Echo 309 5th Ave New York City NY	ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/22/98	\$178.00
Jewish World 115 Middle Neck Rd Great Neck NY 11021	ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/98	\$756.00
South Shore Tribune 4 California Pl Island Park NY 11558	ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/05/98 11/09/98	\$850.00 \$399.00
SUBTOTAL of Disbursements This Page (optional)			\$3,137.66
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

Operating Expenditures

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic BOX 1100 Albany NY 12250-0001	phone calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/27/98	\$46.28
Bell Atlantic BOX 1100 Albany NY 12250-0001	car phone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/12/98	\$392.18
Bell Atlantic BOX 1100 Albany NY 12250-0001	phone for hq. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/16/98	\$347.98
U-Haul 225 Rt. 110 Farmingdale NY 11735	storage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/27/98 11/20/98	\$77.95 Memo \$77.95 Memo
Irish Voice BOX 686 Sicklerville NJ 08081-990	ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/22/98	\$150.00
Gte Airfone Oak Brook IL	phone calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/20/98	\$10.23 Memo
Rosenfeld, Anne 185 Park Ave Long Beach NY 11561	consultant Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/29/98	\$3000.00
Monocle, The 107 NE D St Washington DC 20002	fund raiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/27/98	\$1547.46 Memo
Marsid Group, The 245 Westbury Ave Carle Place NY 11514	letterhead and envelopes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/16/98	\$503.00

SUBTOTAL of Disbursements This Page (optional)

\$4,439.44

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 6
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Grille 601 NW Pennsylvania Ave Washington DC	meal Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/20/98	\$365.95 Memo
77 Willis restaurant 339 4th Ave New York NY 10017	meal Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/20/98	\$86.00 Memo
Chase Visa BOX 15836 Firm Zip DE 19886-5836	plane ticket Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/21/98	\$275.43
Long Island Power Authori Sunrise Hwy Bellmore NY 11710	electric for hq. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/22/98 11/16/98	\$129.51 \$75.33
S.D. Assoc. BOX 4565 Hartford CT 06147	labels Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/26/98 10/29/98	\$2226.80 \$738.53
Seaford Palace Diner Merrick Rd Seaford NY 11783	breakfast Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/03/98	\$203.00
Murray, David 741 Alexander Rd Princeton NJ	mailings Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/27/98	\$26760.00
Capitol One Bank BOX 85147 Courtesy Reply VA 23285	Office supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/16/98	\$65.15
Ryan Air Ltd. Dublin, Ireland	plane ticket Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/21/98	\$275.43 Memo
SUBTOTAL of Disbursements This Page (optional)			\$30,473.75
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 6
FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (in full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A To Z Printing 514 Broadway Massapequa NY 11758	printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/22/98	\$201.61
Bombay Palace 350 Northern Blvd Great Neck NY 11021	fund raising dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/23/98	\$1482.00
New York State Aflcio 48 E 21 St New York NY 10010	ad Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/23/98	\$225.00
Bell Arbor Promotions 921C Conklin St Farmingdale NY 11735	balloons Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/20/98	\$250.00
Plaza Hotel, The New York NY 10019	fund raiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/01/98	\$6889.31
Brown Osprey Merrick Rd Seaford NY 11783	dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/03/98	\$672.08
Wantagh Inn, The Wantagh NY 11793	dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/04/98	\$1328.20
First Card BOX 15098 Firm Zip DE 19886	hotel rooms Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/07/98	\$375.47
Long Island Marriott 101 James Doolittle Blvd Uniondale NY 11553	hotel rooms Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/07/98	\$375.47 Memo.
SUBTOTAL of Disbursements This Page (optional)			\$11,423.87
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

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McCulloch, Jennifer 1620 Kenwood Ave Alexandria VA 22302	hotel and cab Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/07/98	\$403.64
<i>British Airways</i> New York NY	airline tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	11/20/98	\$1238.63 Memo
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 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 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 Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) \$403.64

TOTAL This Period (last page this line number only) \$77,493.87

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Other Disbursements

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

NAME OF COMMITTEE (in Full)


Pete King For Congress Committee C00272211

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Comm To Relect. Sen. Bruno 164 Post Ave Westbury NY 11590	ticket Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	10/21/98	\$250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 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 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 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 Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			\$250.00
TOTAL This Period (last page this line number only)			\$250.00

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 12/3/98
<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	
 PREPARER	12/6/98 DATE PREPARED