24020680245

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
04 AUG 31 AM 11:01

Office Use Only

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

Friends of Howard Mills

ADDRESS (number and street) ▼ P.O. Box 37

☐ Check if different than previously reported. (ACC)

Albany | NY | 12207

2. FEC IDENTIFICATION NUMBER ▼ C00397331

CITY ▲ STATE ▲ ZIP CODE ▲

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

STATE ▼ DISTRICT NY

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

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

☒ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on 11 02 2004 in the State of NY

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

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

Election on ____ in the State of ____

5. Covering Period 07 01 2004 through 08 25 2004

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: Michael Avella

Signature of Treasurer: Electronically Filed by Michael Avella Date: ____

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2

Write or Type Committee Name

Friends of Howard Mills

Report Covering the Period: From: 07 01 2004 To: 08 25 2004

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	77960.00	531233.12
	(b) Total Contribution Refunds (from Line 20(d))	750.00	2200.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	77210.00	529033.12
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	176186.42	424515.19
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	276.16
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	176186.42	424239.03
8.	Cash on Hand at Close of Reporting Period (from Line 27)	106918.13	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Howard Mills

Report Covering the Period: From: 07 01 2004 To: 08 25 2004

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	60269.00	
(ii) Unitemized	16191.00	
(iii) TOTAL of contributions from individuals ▶	76460.00	478633.12
(b) Political Party Committees	0.00	11000.00
(c) Other Political Committees (such as PACS)	1500.00	41600.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	77960.00	531233.12
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	2000.00
13. LOANS		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	276.16
15. OTHER RECEIPTS (Dividends, Interest, etc.)	64.42	521.23
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	78024.42	534030.51

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	176186.42	424515.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of all Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	750.00	1750.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	750.00	2200.00
21. OTHER DISBURSEMENTS	170.34	397.19
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▷	177106.76	427112.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	205000.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	78024.42
25. SUBTOTAL (add Line 23 and Line 24)	284024.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	177106.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	106918.13

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5/93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Dr. Paul Ackerman
Mailing Address 1408 Ocean Avenue 3rd Floor
City: Brooklyn | State: NY | Zip Code: 11230
FEC ID number of contributing federal political committee: C
Name of Employer: North Star Orthopedic
Occupation: Doctor
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 3300.00

Date of Receipt: 07 / 01 / 2004
Transaction ID: SA11A1.7688
Amount of Each Receipt this Period: 2300.00
In-kind - FR 8/8
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Paul Amoruso
Mailing Address Two Jericho Plaza 3rd Floor - Wing B
City: Jericho | State: NY | Zip Code: 11753
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 07 / 2004
Transaction ID: SA11A1.7186
Amount of Each Receipt this Period: 300.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Mark Beckus
Mailing Address P.O. Box 129
City: Mexico | State: NY | Zip Code: 13114
FEC ID number of contributing federal political committee: C
Name of Employer: Mexico Indp. Inc.
Occupation: President
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 28 / 2004
Transaction ID: SA11A1.7457
Amount of Each Receipt this Period: 100.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6/93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 12a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Dr. Willam Barrick
Mailing Address 1283 Noxon Road
City: Lagrangeville | State: NY | Zip Code: 12540
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Associates
Occupation: Orthopedic Surgeon
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 03 / 2004
Transaction ID: SA11A1.7801
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Dr. Raymond Baeri
Mailing Address 236 Crystal Run SU 2
City: Middletown | State: NY | Zip Code: 10940
FEC ID number of contributing federal political committee. C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 350.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7760
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Mr. Richard Bauer
Mailing Address 2 Commonwealth Ave
City: Newburgh | State: NY | Zip Code: 12550
FEC ID number of contributing federal political committee. C
Name of Employer: Eastern Alloys, Inc.
Occupation: Business Executive
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 12 / 2004
Transaction ID: SA11A1.7148
Amount of Each Receipt this Period: 200.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1450.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mrs. Heather Bennett
Mailing Address 93 Font Grove Road
City: Slingerlands | State: NY | Zip Code: 12159
FEC ID number of contributing federal political committee: C
Name of Employer: The Bennet Firm, Inc
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 12 / 2004
Transaction ID: SA11A1.7150
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Andrew Blum
Mailing Address 350 Madison Avenue Floor 8
City: New York | State: NY | Zip Code: 10017
FEC ID number of contributing federal political committee: C
Name of Employer: C.E. Unterberg, Towbin In-ternational
Occupation: Chairman
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 02 / 2004
Transaction ID: SA11A1.7577
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bond, Schoeneck & King, PLLC
Mailing Address 11 Washington Avenue
City: Albany | State: NY | Zip Code: 12210
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 299.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7812
Amount of Each Receipt this Period: 149.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 649.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Leonard Bower
Mailing Address 145F Gibbs Street
City: Rochester | State: NY | Zip Code: 14605
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7755
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Edward Brehm
Mailing Address 515 5th Ave
City: Watervliet | State: NY | Zip Code: 12189
FEC ID number of contributing federal political committee: C
Name of Employer: New York State
Occupation: Call Center Manager
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 21 / 2004
Transaction ID: SA11A1.7333
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Harold Brown, Jr.
Mailing Address 500 Mallard Dr
City: Camillus | State: NY | Zip Code: 13031
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 344.00

Date of Receipt: 08 / 06 / 2004
Transaction ID: SA11A1.7650
Amount of Each Receipt this Period: 149.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1399.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Peter C. Brown
Mailing Address 18 Clove Road
City: Castleton | State: NY | Zip Code: 12033
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7817
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
J. Christopher Callaghan
Mailing Address 22 Third Street
City: Waterford | State: NY | Zip Code: 12188
FEC ID number of contributing federal political committee: C
Name of Employer: Information requested | Occupation: Information requested
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1025.00

Date of Receipt: 07 / 22 / 2004
Transaction ID: SA11A1.7373
Amount of Each Receipt this Period: 25.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. John D. Cannon
Mailing Address 2170 Whitehaven Rd
City: Grand Island | State: NY | Zip Code: 14072
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7819
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1025.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Capitaland Animal Hospital
Mailing Address 990 Troy Schenectady Rd
City: Latham | State: NY | Zip Code: 12110
FEC ID number of contributing federal political committee. C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 11 / 2004
Transaction ID: SA11A1.7620
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. David Christa
Mailing Address 101 Victor Heights Pkwy
City: Victor | State: NY | Zip Code: 14564
FEC ID number of contributing federal political committee. C
Name of Employer: Christa Construction | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 18 / 2004
Transaction ID: SA11A1.7757
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Phillip Clark
Mailing Address 186 North Water St
City: Rochester | State: NY | Zip Code: 14604
FEC ID number of contributing federal political committee. C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 18 / 2004
Transaction ID: SA11A1.7759
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) — PAGE 11 / 93

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Stephen J. Cole-Hatchard
Mailing Address 315 Route 210
City: Stony Point | State: NY | Zip Code: 10980
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: Police Detective/Attorney
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1150.00

Date of Receipt: 08 / 13 / 2004
Transaction ID: SA11A1.7336
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Committee for Roy Goodman
Mailing Address 1035 Fifth Avenue
City: New York | State: NY | Zip Code: 10028
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 07 / 14 / 2004
Transaction ID: SA11A1.7214
Amount of Each Receipt this Period: 2000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Robert Congel
Mailing Address 7237 Woodchuck Hill Road
City: Fayetteville | State: NY | Zip Code: 13066
FEC ID number of contributing federal political committee: C
Name of Employer: Destiny USA
Occupation: Commercial Developer
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 09 / 16 / 2004
Transaction ID: SA11A1.7342
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 12 / 99

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Curtin
Mailing Address 93 Old Town Rd
City: Peru | State: NY | Zip Code: 12972
FEC ID number of contributing federal political committee. C
Name of Employer: Harris Beach LLP
Occupation: Attorney
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 16 / 2004
Transaction ID: SA11A1.7252
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Fred Dana
Mailing Address 52 Hatfield Lane
City: Ocean | State: NY | Zip Code: 10924
FEC ID number of contributing federal political committee. C
Name of Employer: Dana Distributors, Inc.
Occupation: Principal Co-Owner
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 13 / 2004
Transaction ID: SA11A1.7338
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stephen M. Dorsey
Mailing Address 17 Tiffany Place
City: Saratoga Springs | State: NY | Zip Code: 12866
FEC ID number of contributing federal political committee. C
Name of Employer: Information requested
Occupation: Information requested
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 550.00

Date of Receipt: 07 / 20 / 2004
Transaction ID: SA11A1.7300
Amount of Each Receipt this Period: 50.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 800.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 98
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Gary L Dower
Mailing Address PO Box 33
City: Skaneateles | State: NY | Zip Code: 13152
FEC ID number of contributing federal political committee: C
Name of Employer Information requested
Occupation: Attorney
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 3250.00

Date of Receipt: 07 / 14 / 2004
Transaction ID: SA11A1.7219
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gary L Dower
Mailing Address PO Box 33
City: Skaneateles | State: NY | Zip Code: 13152
FEC ID number of contributing federal political committee: C
Name of Employer Information requested
Occupation: Attorney
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 3750.00

Date of Receipt: 08 / 06 / 2004
Transaction ID: SA11A1.7553
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Lewis Eisenberg
Mailing Address 2 Penn Plaza
City: New York | State: NY | Zip Code: 10121
FEC ID number of contributing federal political committee: C
Name of Employer: NYC Host Committee 2004
Occupation: Deputy Co-Chairman
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 07 / 14 / 2004
Transaction ID: SA11A1.7223
Amount of Each Receipt this Period: 2000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Herbert Ellis
Mailing Address 8 Pheasant Lane
City: Menands | State: NY | Zip Code: 12204
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 24 / 2004
Transaction ID: SA11A1.7797
Amount of Each Receipt this Period: 300.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Edward Engle
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 215.00

Date of Receipt: 07 / 08 / 2004
Transaction ID: SA11A1.7580
Amount of Each Receipt this Period: 80.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Edward Engle
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 315.00

Date of Receipt: 07 / 09 / 2004
Transaction ID: SA11A1.7581
Amount of Each Receipt this Period: 100.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 480.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16/99
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Edward Gallagher, Jr.
Mailing Address 68 St. Andrews Rd
City: Walden | State: NY | Zip Code: 12586
FEC ID number of contributing federal political committee: C
Name of Employer: Gallagher Transportation Group
Occupation: Transportation Executive
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 780.00

Date of Receipt: 07 / 07 / 2004
Transaction ID: SA11A1.7178
Amount of Each Receipt this Period: 80.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Leslie Goldstein
Mailing Address 488 White Spruce Blvd
City: Rochester | State: NY | Zip Code: 14623
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7761
Amount of Each Receipt this Period: 2000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. David Gruen
Mailing Address 34 Middlesex Road
City: Buffalo | State: NY | Zip Code: 14216
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: CPA
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 20 / 2004
Transaction ID: SA11A1.7773
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2330.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 93
(check only one)
X 11a | 11b | 11c | 11d | 12 | 13a | 13b | 14 | 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Roger Hannay
Mailing Address 24 County Route 412
City: Westerlo | State: NY | Zip Code: 12193
FEC ID number of contributing federal political committee: C
Name of Employer: Hannay Reels, Inc.
Occupation: Manufacturing Executive
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 08 / 02 / 2004
Transaction ID: SA11A1.7545
Amount of Each Receipt this Period: 500.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. John Hendrickson
Mailing Address 40 Geyser Rd
City: Saratoga Springs | State: NY | Zip Code: 12866
FEC ID number of contributing federal political committee: C
Name of Employer: Marylou Whitney Stables
Occupation: President
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 2000.00
Date of Receipt: 07 / 29 / 2004
Transaction ID: SA11A1.7493
Amount of Each Receipt this Period: 2000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Mariellus Hassel-Artz
Mailing Address 2835 Fairways Place W
City: Wilson | State: WY | Zip Code: 83014
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Investor
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 2000.00
Date of Receipt: 08 / 12 / 2004
Transaction ID: SA11A1.7363
Amount of Each Receipt this Period: 2000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 99
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Stan Hiatt
Mailing Address 617 Violet St
City: Modesto | State: CA | Zip Code: 95368
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Aviation Tech.
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 07 / 2004
Transaction ID: SA11A1.7609
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Stan Hiatt
Mailing Address 617 Violet St
City: Modesto | State: CA | Zip Code: 95356
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Aviation Tech.
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 750.00

Date of Receipt: 08 / 13 / 2004
Transaction ID: SA11A1.7636
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Stan Hiatt
Mailing Address 617 Violet St
City: Modesto | State: CA | Zip Code: 95356
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Aviation Tech.
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 17 / 2004
Transaction ID: SA11A1.7637
Amount of Each Receipt this Period: 1250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ms. Elsie Hillman
Mailing Address 5120 Hollyrood Road
City: Pittsburgh State: PA Zip Code: 15213
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Housewife
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 08 / 11 / 2004
Transaction ID: SA11A1.7624
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ms. Gail Healy Hilson
Mailing Address One East 66th Street
City: New York City State: NY Zip Code: 10021
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 08 / 24 / 2004
Transaction ID: SA11A1.7625
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Hiscock & Barclay, LLP
Mailing Address Financial Plaza
221 S. Warren Street
City: Syracuse State: NY Zip Code: 13202
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 400.00
Date of Receipt: 07 / 28 / 2004
Transaction ID: SA11A1.7650
Amount of Each Receipt this Period: 50.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) | PAGE 19 / 93

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Hiscock & Barclay, LLP
Mailing Address Financial Plaza
221 S. Warren Street
City: Syracuse State: NY Zip Code: 13202
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 499.00

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7868
Amount of Each Receipt this Period: 99.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Hon. William Barclay
Mailing Address Douglaston Manor
4360 State Route 13
City: Pulaski State: NY Zip Code: 13142
FEC ID number of contributing federal political committee: C
Name of Employer: NYS
Occupation: NYS Assemblyman
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1644.74

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7868.1
Amount of Each Receipt this Period: 1.01
Hiscock & Barclay Split
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Bonner
Mailing Address 528 Plum Street
Apt 304
City: Syracuse State: NY Zip Code: 13204
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 201.01

Date of Receipt: 08 / 26 / 2004
Transaction ID: SA11A1.7868.6
Amount of Each Receipt this Period: 1.01
Hiscock & Barclay Split
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 99.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. James Domagalski
Mailing Address 75 Hawthorne Drive
City: Orchard Park | State: NY | Zip Code: 14127
FEC ID number of contributing federal political committee: C
Name of Employer: Hiscock & Barclay, LLP
Occupation: Attorney
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 251.01

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7868.23
Amount of Each Receipt this Period: 1.01
Hiscock & Barclay Split
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Hon. Amory Houghton, Jr
Mailing Address 80 East Market St. Suite 201
City: Corning | State: NY | Zip Code: 14830
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 07 / 2004
Transaction ID: SA11A1.7136
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Bernard Iacovangelo
Mailing Address 20 Autumn Wood
City: Rochester | State: NY | Zip Code: 14624
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7763
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 93
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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Frank Iacovangelo
Mailing Address 10 Autumn Wood
City: Rochester | State: NY | Zip Code: 14624
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 16 / 2004
Transaction ID: SA11A1.7765
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Islip Womens Republican Club
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 13 / 2004
Transaction ID: SA11A1.7348
Amount of Each Receipt this Period: 300.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. John Khum
Mailing Address P.O. Box 459
City: Albany | State: NY | Zip Code: 12201
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 16 / 2004
Transaction ID: SA11A1.7262
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2300.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22/63
(check only one)
X 11a | 11b | 11c | 11d | 12 | 13a | 13b | 14 | 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Leopld Koppel
Mailing Address P.O. Box 390
City: Fort Plain | State: NY | Zip Code: 13339
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Retired
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 700.00

Date of Receipt: 07 / 19 / 2004
Transaction ID: SA11A1.7287
Amount of Each Receipt this Period: 500.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pauline Kosuga
Mailing Address 79 Bisch Road
City: Middletown | State: NY | Zip Code: 10940
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Retired
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 09 / 2004
Transaction ID: SA11A1.7564
Amount of Each Receipt this Period: 100.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert H. Kuhlmann
Mailing Address PO Box 652
City: Ellenville | State: NY | Zip Code: 12428
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Retired
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 330.00

Date of Receipt: 07 / 23 / 2004
Transaction ID: SA11A1.7399
Amount of Each Receipt this Period: 80.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 680.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Inder Kumar
Mailing Address 10 Anna Ct
City: Middletown | State: NY | Zip Code: 10940
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 230.00

Date of Receipt: 07 / 20 / 2004
Transaction ID: SA11A1.7315
Amount of Each Receipt this Period: 80.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. R.Wayne Lechase
Mailing Address 420 Windward Shores Drive
City: Webster | State: NY | Zip Code: 14580
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7767
Amount of Each Receipt this Period: 2000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. John Luedke
Mailing Address 335 Sarah Wells Trail
City: Goshen | State: NY | Zip Code: 10924
FEC ID number of contributing federal political committee: C
Name of Employer: Self | Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7348
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3080.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 99
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr. Orrin MacMurray, P.E.
Mailing Address 6311 Dixon Road
City: Camden | State: NY | Zip Code: 13316
FEC ID number of contributing federal political committee: C
Name of Employer: C&S Companies
Occupation: Pres. & CEO
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 28 / 2004
Transaction ID: SA11A1.7500
Amount of Each Receipt this Period: 100.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Mr. Orrin MacMurray, P.E.
Mailing Address 6311 Dixon Road
City: Camden | State: NY | Zip Code: 13316
FEC ID number of contributing federal political committee: C
Name of Employer: C&S Companies
Occupation: Pres. & CEO
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 599.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7785
Amount of Each Receipt this Period: 99.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Mr. Francis Menton
Mailing Address 391 Blaecker St
City: New York | State: NY | Zip Code: 10014
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Lawyer
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 06 / 2004
Transaction ID: SA11A1.7561
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1199.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Metrocenter Associates LLC
Mailing Address 49 Court St.
City: Binghamton | State: NY | Zip Code: 13901
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 09 / 2004
Transaction ID: SA11A1.7568
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Mr. Dennis Morga
Mailing Address 4908 Bramble Wood Trl
City: Canandaigua | State: NY | Zip Code: 14424
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7787
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Mr. John Murphy
Mailing Address P.O. Box 427
City: Ithaca | State: NY | Zip Code: 14851
FEC ID number of contributing federal political committee: C
Name of Employer: Cornwell Trust & Estates
Occupation: Attorney
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 20 / 2004
Transaction ID: SA11A1.7304
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)
X 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Nixon Peabody LLP
Mailing Address P.O. Box 31051
City: Rochester | State: NY | Zip Code: 14603
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 20 / 2004
Transaction ID: SA11A1.7319
Amount of Each Receipt this Period: 500.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nixon Peabody LLP
Mailing Address P.O. Box 31051
City: Rochester | State: NY | Zip Code: 14603
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 750.00

Date of Receipt: 07 / 29 / 2004
Transaction ID: SA11A1.7653
Amount of Each Receipt this Period: 250.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Nixon Peabody LLP
Mailing Address P.O. Box 31051
City: Rochester | State: NY | Zip Code: 14603
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — X Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 29 / 2004
Transaction ID: SA11A1.7654
Amount of Each Receipt this Period: 250.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Thomas O'Connor
Mailing Address One Cobble Hill Rd
City: Loudonville | State: NY | Zip Code: 12211
FEC ID number of contributing federal political committee: C
Name of Employer: Mohawk Paper Mills
Occupation: COB
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 350.00

Date of Receipt: 07 / 15 / 2004
Transaction ID: SA11A1.7273
Amount of Each Receipt this Period: 100.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Charles Parsons
Mailing Address 104 Richard Road
City: Syracuse | State: NY | Zip Code: 13215
FEC ID number of contributing federal political committee: C
Name of Employer: Parsons and Associates
Occupation: Insurance Agent
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 26 / 2004
Transaction ID: SA11A1.7593
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. L. William Paxon
Mailing Address 4004 Sharp Pl
City: Alexandria | State: VA | Zip Code: 22304
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7769
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1350.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
D.W. Porto
Mailing Address PO Box 2201
City: Middletown | State: NY | Zip Code: 10940
FEC ID number of contributing federal political committee: C
Name of Employer: Alta East | Occupation: Oil
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 06 / 2004
Transaction ID: SA11A1.7139
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Michael Puntillo
Mailing Address 277 Northern Boulevard
City: Great Neck | State: NY | Zip Code: 11021
FEC ID number of contributing federal political committee: C
Name of Employer: | Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 13 / 2004
Transaction ID: SA11A1.7210
Amount of Each Receipt this Period: 300.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
RD Management LLC
Mailing Address 810 Seventh Avenue
City: New York | State: NY | Zip Code: 10019
FEC ID number of contributing federal political committee: C
Name of Employer: | Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 27 / 2004
Transaction ID: SA11A1.7649
Amount of Each Receipt this Period: 500.00
replacement for Inc. check
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. John Riedman
Mailing Address 45 East Ave
City: Rochester | State: NY | Zip Code: 14604
FEC ID number of contributing federal political committee: C
Name of Employer: Riedman Corporation
Occupation: President
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 08 / 09 / 2004
Transaction ID: SA11A1.7570
Amount of Each Receipt this Period: 2000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth Ringler
Mailing Address 10 Quincy Ct
City: Glenmont | State: NY | Zip Code: 12077
FEC ID number of contributing federal political committee: C
Name of Employer: NYS
Occupation: Commissioner
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 07 / 2004
Transaction ID: SA11A1.7186
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Alan Robinson
Mailing Address 9885 Rocky Point
City: Clarence | State: NY | Zip Code: 14031
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7788
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Roseman
Mailing Address 22 W 15th St., Apt PHD
City: New York | State: NY | Zip Code: 10011
FEC ID number of contributing federal political committee: C
Name of Employer: Newmark
Occupation: Real Estate
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 29 / 2004
Transaction ID: SA11A1.7515
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Geoffrey Rosenberger
Mailing Address 7 Lily Pond Lake
City: Pittsford | State: NY | Zip Code: 14534
FEC ID number of contributing federal political committee: C
Name of Employer: Retired
Occupation: Retired
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 800.00

Date of Receipt: 07 / 21 / 2004
Transaction ID: SA11A1.7367
Amount of Each Receipt this Period: 800.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mrs. Joyce Rovers
Mailing Address 1908 Lake Shore Rd
City: Chazy | State: NY | Zip Code: 12921
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 19 / 2004
Transaction ID: SA11A1.7291
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2050.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Juan Sabetar
Mailing Address 145 East 76th Street, Apt. 3B
City: New York | State: NY | Zip Code: 10021
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 4000.00

Date of Receipt: 07 / 19 / 2004
Transaction ID: SA11A1.7293
Amount of Each Receipt this Period: 4000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Anthony Salerno
Mailing Address 24 Lohmaier Lane
City: Lake Katrine | State: NY | Zip Code: 12449
FEC ID number of contributing federal political committee: C
Name of Employer: Healthcare Associates | Occupation: CEO
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 2350.00

Date of Receipt: 07 / 27 / 2004
Transaction ID: SA11A1.7446
Amount of Each Receipt this Period: 200.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Souderi
Mailing Address P.O. Box 3
6786 Widewaters Parkway
City: DeWitt | State: NY | Zip Code: 13214
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 299.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7359
Amount of Each Receipt this Period: 99.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4299.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Scuderi
Mailing Address P.O. Box 3
5788 Widewaters Parkway
City: DeWitt State: NY Zip Code: 13214
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 799.00

Date of Receipt: 08 / 24 / 2004
Transaction ID: SA11A1.7751
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Kurt Sherman
Mailing Address 5 Kelly Ave
City: Marcellus State: NY Zip Code: 13108
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 249.00

Date of Receipt: 08 / 25 / 2004
Transaction ID: SA11A1.7834
Amount of Each Receipt this Period: 49.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Terry Simonds
Mailing Address 1445 Langham Creek Drive
City: Houston State: TX Zip Code: 77084
FEC ID number of contributing federal political committee: C
Name of Employer: Universal Fidelity Corp.
Occupation: CEO
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 09 / 2004
Transaction ID: SA11A1.7815
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1049.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Frank Sinatra
Mailing Address 375 South End Avenue
Apt. 8G
City: New York | State: NY | Zip Code: 10280
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: 2004
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 17 / 2004
Transaction ID: SA11A1.7361
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Elizabeth E. Smith
Mailing Address Hermonamus Weller House 1806
Box 209
City: Pine Bush | State: NY | Zip Code: 12566
FEC ID number of contributing federal political committee. C
Name of Employer: RJ Smith Realty
Occupation: Realtor
Receipt For: 2004
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 230.00

Date of Receipt: 07 / 06 / 2004
Transaction ID: SA11A1.7189
Amount of Each Receipt this Period: 80.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. James Smith
Mailing Address 3348 Route 208
City: Campbell Hall | State: NY | Zip Code: 10916
FEC ID number of contributing federal political committee. C
Name of Employer: Self
Occupation: Civil Engineer
Receipt For: 2004
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 09 / 2004
Transaction ID: SA11A1.7574
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 830.00

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

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

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. John Summers
Mailing Address 195 St. Paul Street
City: Rochester | State: NY | Zip Code: 14604
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 23 / 2004
Transaction ID: SA11A1.7783
Amount of Each Receipt this Period: 500.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Suntru Associates LLC
Mailing Address 690 St. Paul Street
City: Rochester | State: NY | Zip Code: 14605
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 18 / 2004
Transaction ID: SA11A1.7771
Amount of Each Receipt this Period: 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Margarette Taylor
Mailing Address 209 E. 56th St Apt. 12P
City: New York | State: NY | Zip Code: 10022
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: homemaker
Receipt For: 2004 — X Primary | General | Other (specify)
Election Cycle-to-Date: 2000.00

Date of Receipt: 07 / 16 / 2004
Transaction ID: SA11A1.7281
Amount of Each Receipt this Period: 2000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr. Steven Thomas
Mailing Address 55 West 2nd Street
City: Oswego | State: NY | Zip Code: 13126
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 350.00

Date of Receipt: 07 / 13 / 2004
Transaction ID: SA11A1.7212
Amount of Each Receipt this Period: 350.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Lynette M. Tucker
Mailing Address 115 Huntersfield Road
City: Delmar | State: NY | Zip Code: 12054
FEC ID number of contributing federal political committee: C
Name of Employer: Albany Medical Center
Occupation: Education Specialist
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1100.00

Date of Receipt: 07 / 12 / 2004
Transaction ID: SA11A1.7202
Amount of Each Receipt this Period: 100.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Two Plus Four Construction
Mailing Address 6320 Fly Road
City: East Syracuse | State: NY | Zip Code: 13057
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 260.00

Date of Receipt: 07 / 27 / 2004
Transaction ID: SA11A1.7450
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 700.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. John Vandervort
Mailing Address 84 Commonwealth Drive
City: Glenmont | State: NY | Zip Code: 12077
FEC ID number of contributing federal political committee. C
Name of Employer: The Vandervort Group, LLC
Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 422.50

Date of Receipt: 07 / 22 / 2004
Transaction ID: SA11A1.7371
Amount of Each Receipt this Period: 422.50
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Todd Vandervort
Mailing Address 37 Springfield Drive
City: Voorheesville | State: NY | Zip Code: 12186
FEC ID number of contributing federal political committee. C
Name of Employer: The Vandervort Group, LLC
Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 16 / 2004
Transaction ID: SA11A1.7283
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Todd Vandervort
Mailing Address 37 Springfield Drive
City: Voorheesville | State: NY | Zip Code: 12186
FEC ID number of contributing federal political committee. C
Name of Employer: The Vandervort Group, LLC
Occupation
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 672.50

Date of Receipt: 07 / 22 / 2004
Transaction ID: SA11A1.7372
Amount of Each Receipt this Period: 422.50
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1095.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 93
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
David Wallingford
Mailing Address 191 Route 9P
City: Saratoga | State: NY | Zip Code: 12866
FEC ID number of contributing federal political committee: C
Name of Employer: information requested
Occupation: information requested
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 525.00

Date of Receipt: 07 / 20 / 2004
Transaction ID: SA11A1.7306
Amount of Each Receipt this Period: 25.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Welch for Congress Committee
Mailing Address 306 Winkworth Parkway
City: Syracuse | State: NY | Zip Code: 13215
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 09 / 2004
Transaction ID: SA11A1.7639
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Pauline Willman
Mailing Address 153 Ketcham Rd
City: Voorheesville | State: NE | Zip Code: 12186
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Certified Shorthand Reporter
Receipt For: 2004 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 16 / 2004
Transaction ID: SA11A1.7284
Amount of Each Receipt this Period: 250.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1275.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 83
(check only one)
X 11a | 11b | 11c | 11d | 12 | 13a | 13b | 14 | 15

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Genevieve Winstanley

Mailing Address PO Box 1195

City: Greenwood Lake | State: NY | Zip Code: 10925

FEC ID number of contributing federal political committee: C

Name of Employer: Retired

Occupation: Retired

Receipt For: 2004
X Primary | General | Other (specify)

Election Cycle-to-Date: 230.00

Date of Receipt: 07 / 06 / 2004

Transaction ID: SA11A1.7192

Amount of Each Receipt this Period: 80.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	80.00
TOTAL This Period (last page this line number only)	50269.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 93
(check only one)
11a | 11b | X 11c | 11d
12 | 13a | 13b | 14 | 15

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ironworkers Political Action League
Mailing Address 1750 New York Avenue, N.W.
City: Washington | State: DC | Zip Code: 20006
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 27 / 2004
Transaction ID: SA11C.7444
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Peckham Industries, Inc
Mailing Address 20 Haarlem Avenue
City: White Plains | State: NY | Zip Code: 10603
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2004 — [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 08 / 2004
Transaction ID: SA11C.7138
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	1500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Accu Data America

Mailing Address 4210 Metro Parkway
Suite 300

City: Ft. Myers | State: FL | Zip Code: 33916

Purpose of Disbursement:

Candidate Name: Friends of Howard Mills

Category/Type: 003

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6943
Date of Disbursement: 07 / 14 / 2004

Amount of Each Disbursement this Period: 2448.08

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Dr. Paul Ackerman

Mailing Address 1408 Ocean Avenue 3rd Floor

City: Brooklyn | State: NY | Zip Code: 11230

Purpose of Disbursement: In-kind - FR 6/8

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7669
Date of Disbursement: 07 / 01 / 2004

Amount of Each Disbursement this Period: 2300.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Albany Country Club

Mailing Address 300 Warner Road

City: Voorheesville | State: NY | Zip Code: 12186

Purpose of Disbursement: Albany Co FR

Candidate Name: Friends of Howard Mills

Category/Type: 007

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6982
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 899.08

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 5647.16

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Beringer & Associates

Mailing Address 25 Clinton Ave

City: Cortland | State: NY | Zip Code: 13045

Purpose of Disbursement: Greek Peak FR Advertisement

Category/Type: 004

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6976
Date of Disbursement: 07 / 27 / 2004

Amount of Each Disbursement this Period: 423.33

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mrs Lauren Bryant

Mailing Address 22 Russell Rd

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6919
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 1900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mrs Lauren Bryant

Mailing Address 22 Russell Rd

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6951
Date of Disbursement: 07 / 15 / 2004

Amount of Each Disbursement this Period: 1900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 4223.33

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mrs Lauren Bryant

Mailing Address 22 Russell Rd

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Travel Reimbursement

Category/Type: 002

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7054
Date of Disbursement: 07 / 29 / 2004

Amount of Each Disbursement this Period: 141.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mrs Lauren Bryant

Mailing Address 22 Russell Rd

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7046
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 1800.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mrs Lauren Bryant

Mailing Address 22 Russell Rd

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7078
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 1800.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3941.40

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Campaign Solutions

Mailing Address 118 N. Saint Asaph Street

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: website

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7132
Date of Disbursement: 08 / 19 / 2004

Amount of Each Disbursement this Period: 2800.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mr. Sean Carroll

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant Fee- 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6912
Date of Disbursement: 07 / 01 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mr. Sean Carroll

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6955
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr. Sean Carroll

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7060
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Mr. Sean Carroll

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7072
Date of Disbursement: 08 / 18 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Centurion Business Machines, Inc.

Mailing Address 1237 Central Ave, Suite 11D

City: Albany | State: NY | Zip Code: 12205

Purpose of Disbursement:

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6936
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 157.89

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1657.89

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Centurion Business Machines, Inc.

Mailing Address 1237 Central Ave, Suite 110
City Albany State NY Zip Code 12206

Purpose of Disbursement
copy overcharge

Category/Type 001

Candidate Name
Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6966
Date of Disbursement 07 / 22 / 2004

Amount of Each Disbursement this Period 242.57

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Centurion Business Machines, Inc.

Mailing Address 1237 Central Ave, Suite 110
City Albany State NY Zip Code 12205

Purpose of Disbursement
Toner (copier)

Category/Type 001

Candidate Name
Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6967
Date of Disbursement 07 / 22 / 2004

Amount of Each Disbursement this Period 48.71

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address Three E-Comm Square
City Albany State NY Zip Code 12207

Purpose of Disbursement

Category/Type 001

Candidate Name
Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6934
Date of Disbursement 07 / 07 / 2004

Amount of Each Disbursement this Period 1257.32

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1548.60

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
City Square Associates, LLC

Mailing Address Three E-Comm Square

City: Albany | State: NY | Zip Code: 12207

Purpose of Disbursement:

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.6935
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 346.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
City Square Associates, LLC

Mailing Address Three E-Comm Square

City: Albany | State: NY | Zip Code: 12207

Purpose of Disbursement: July 04 service

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.6960
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 129.90

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address Three E-Comm Square

City: Albany | State: NY | Zip Code: 12207

Purpose of Disbursement: Aug 04 Parking Tags

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7063
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 346.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 822.70

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 18a [ ] 18b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
City Square Associates, LLC

Mailing Address Three E-Comm Square

City: Albany | State: NY | Zip Code: 12207

Purpose of Disbursement: phone repair

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7071
Date of Disbursement: 08 / 10 / 2004

Amount of Each Disbursement this Period: 129.90

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 57 Berry Avenue

City: Staten Island | State: NY | Zip Code: 10312

Purpose of Disbursement: Nexis account

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6931
Date of Disbursement: 07 / 04 / 2004

Amount of Each Disbursement this Period: 1500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 57 Berry Avenue

City: Staten Island | State: NY | Zip Code: 10312

Purpose of Disbursement: Consultant Fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7053
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 10000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 11629.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 48 / 93

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mrs. Christina Comer

Mailing Address P.O. Box 197

City: Saratoga Springs | State: NY | Zip Code: 12866

Purpose of Disbursement: Consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6913
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 10000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mrs. Christina Comer

Mailing Address P.O. Box 197

City: Saratoga Springs | State: NY | Zip Code: 12866

Purpose of Disbursement: consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6958
Date of Disbursement: 07 / 20 / 2004

Amount of Each Disbursement this Period: 10000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mrs. Christina Comer

Mailing Address P.O. Box 197

City: Saratoga Springs | State: NY | Zip Code: 12866

Purpose of Disbursement: expense reimbursment (May/June)

Category/Type: 002

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6973
Date of Disbursement: 07 / 29 / 2004

Amount of Each Disbursement this Period: 1684.25

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 21684.25

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mrs. Christina Comer

Mailing Address P.O. Box 197

City: Saratoga Springs | State: NY | Zip Code: 12866

Purpose of Disbursement: consultant fee

Category/ Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7837
Date of Disbursement: 08 / 24 / 2004

Amount of Each Disbursement this Period: 10000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Cooley Group, Inc

Mailing Address 806 Linden Ave
Suite 500

City: Rochester | State: NY | Zip Code: 14625

Purpose of Disbursement: Barclay FR

Category/ Type: 007

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6990
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 361.64

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Cosimo's Brick Oven of Wallkill Inc.

Mailing Address 620 Rt. 211 E.

City: Middletown | State: NY | Zip Code: 10940

Purpose of Disbursement: B-day FR

Category/ Type: 007

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6980
Date of Disbursement: 07 / 27 / 2004

Amount of Each Disbursement this Period: 1133.11

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 11494.76

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Dish Network

Mailing Address Dept 0063

City: Palatine | State: IL | Zip Code: 60055

Purpose of Disbursement

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6939
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 364.32

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Dish Network

Mailing Address Dept 0063

City: Palatine | State: IL | Zip Code: 60055

Purpose of Disbursement

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7055
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 15.98

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Ms. Brittany A Dries

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement
Consultant fee-2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6914
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1070.30

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ms. Brittany A Dries

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee - 2 weeks
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6954
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Ms. Brittany A Dries

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Consultant fee - 2 weeks
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7061
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Ms. Brittany A Dries

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7073
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2100.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: Consultant Fee - 2 weeks

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.6915
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.6942
Date of Disbursement: 07 / 14 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: consultant fee

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.6959
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 300.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2300.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: Consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7049
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: Consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7075
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Mr. Benjamin Dublin

Mailing Address 1 Oxford Drive

City: Latham | State: NY | Zip Code: 12210

Purpose of Disbursement: Travel Reimbursement

Category/Type: 002

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7098
Date of Disbursement: 08 / 19 / 2004

Amount of Each Disbursement this Period: 25.75

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1725.75

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr. John R Durso

Mailing Address 25 Patterson Dr
Apt D

City: Glenmont | State: NY | Zip Code: 12077

Purpose of Disbursement
Travel Reimbursment

Candidate Name
Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6917
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 76.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Mr. John R Durso

Mailing Address 25 Patterson Dr
Apt D

City: Glenmont | State: NY | Zip Code: 12077

Purpose of Disbursement
Reimbursements

Candidate Name
Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7062
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 343.91

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
EDonation 1 Account

Mailing Address 118 N. Saint Asaph St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement
June hosting fees (credit cards)

Candidate Name
Friends of Howard Mills

003 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7661
Date of Disbursement: 07 / 01 / 2004

Amount of Each Disbursement this Period: 650.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1070.61

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
EDonation 1 Account

Mailing Address 118 N. Saint Asaph St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: June credit donation cut - sustaining

Candidate Name: Friends of Howard Mills

003 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7662
Date of Disbursement: 07 / 01 / 2004

Amount of Each Disbursement this Period: 2.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
EDonation 1 Account

Mailing Address 118 N. Saint Asaph St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: July credit card cut - sustaining

Candidate Name: Friends of Howard Mills

003 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7664
Date of Disbursement: 08 / 01 / 2004

Amount of Each Disbursement this Period: 2.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
EDonation 1 Account

Mailing Address 118 N. Saint Asaph St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: July credit card cut(+partial invoice)

Candidate Name: Friends of Howard Mills

003 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7665
Date of Disbursement: 08 / 01 / 2004

Amount of Each Disbursement this Period: 1095.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1100.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
EDonation 1 Account

Mailing Address 116 N. Saint Asaph St.

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: August credit card cut - sustaining

003 Category/ Type

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7667
Date of Disbursement: 08 / 18 / 2004

Amount of Each Disbursement this Period: 5.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement:

003 Category/ Type

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6932
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 17.76

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement:

003 Category/ Type

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6933
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 24.15

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	46.91
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
FedEx
Mailing Address P.O. Box 371461
City: Pittsburg State: PA Zip Code: 15250
Purpose of Disbursement:
Candidate Name: Friends of Howard Mills
Category/Type: 003
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7066
Date of Disbursement: 08 / 09 / 2004
Amount of Each Disbursement this Period: 69.02
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
FedEx
Mailing Address P.O. Box 371461
City: Pittsburg State: PA Zip Code: 15250
Purpose of Disbursement:
Candidate Name: Friends of Howard Mills
Category/Type: 003
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7067
Date of Disbursement: 08 / 09 / 2004
Amount of Each Disbursement this Period: 39.29
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
FedEx
Mailing Address P.O. Box 371461
City: Pittsburg State: PA Zip Code: 15250
Purpose of Disbursement: postage
Candidate Name: Friends of Howard Mills
Category/Type: 003
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7101
Date of Disbursement: 08 / 19 / 2004
Amount of Each Disbursement this Period: 15.83
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 124.14

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: SB17.7102
Date of Disbursement: 08 / 19 / 2004

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Amount of Each Disbursement this Period: 75.26

Purpose of Disbursement: postage

Category/Type: 008

Candidate Name: Friends of Howard Mills

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

B. Full Name (Last, First, Middle Initial)
Gallagher Hollenbeck LLC

Transaction ID: SB17.7069
Date of Disbursement: 07 / 06 / 2004

Mailing Address 57 Berry Avenue

City: Staten Island | State: NY | Zip Code: 10312

Amount of Each Disbursement this Period: 10000.00

Purpose of Disbursement: Consultant Fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

C. Full Name (Last, First, Middle Initial)
Gallagher Hollenbeck LLC

Transaction ID: SB17.7040
Date of Disbursement: 07 / 15 / 2004

Mailing Address 57 Berry Avenue

City: Staten Island | State: NY | Zip Code: 10312

Amount of Each Disbursement this Period: 10000.00

Purpose of Disbursement: Consultant Fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

SUBTOTAL of Disbursements This Page (optional) ▶ 20075.26

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr Brian Jackson
Mailing Address 3412 McDonald Ave
City: Schenectady | State: NY | Zip Code: 12304
Purpose of Disbursement: speech prep (LCA)
Candidate Name: Friends of Howard Mills
Category/Type: 007
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.6984
Date of Disbursement: 07 / 22 / 2004
Amount of Each Disbursement this Period: 500.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Ms. Christine Khalkin
Mailing Address 21 Middlesex Drive
City: Slingerlands | State: NY | Zip Code: 12159
Purpose of Disbursement: Consultant fee - 2 weeks
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.6926
Date of Disbursement: 07 / 02 / 2004
Amount of Each Disbursement this Period: 700.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Ms. Christine Khalkin
Mailing Address 21 Middlesex Drive
City: Slingerlands | State: NY | Zip Code: 12159
Purpose of Disbursement: consultant fee - 2 weeks
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.6952
Date of Disbursement: 07 / 16 / 2004
Amount of Each Disbursement this Period: 700.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1900.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 60 / 93

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ms. Christine Khaikin

Mailing Address 21 Middlesex Drive

City: Slingerlands | State: NY | Zip Code: 12159

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7047
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Ms. Christine Khaikin

Mailing Address 21 Middlesex Drive

City: Slingerlands | State: NY | Zip Code: 12159

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7076
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Lenox Lounge

Mailing Address 289 Lenox Avenue

City: New York | State: NY | Zip Code: 10027

Purpose of Disbursement: event deposit (catering)

Candidate Name: Friends of Howard Mills

007 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7133
Date of Disbursement: 08 / 17 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1900.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
LPD, LLC - Parking Services

Mailing Address 3 E-Comm Square
11 Pruyn Street

City: Albany State: NY Zip Code: 12207

Purpose of Disbursement: parking validation

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6994
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 208.06

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
LPD, LLC - Parking Services

Mailing Address 3 E-Comm Square
11 Pruyn Street

City: Albany State: NY Zip Code: 12207

Purpose of Disbursement: July 04 Validate

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7065
Date of Disbursement: 08 / 09 / 2004

Amount of Each Disbursement this Period: 35.02

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Malliworks

Mailing Address 45 Prospect

City: Albany State: NY Zip Code: 12206

Purpose of Disbursement: FR Invites

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6969
Date of Disbursement: 07 / 23 / 2004

Amount of Each Disbursement this Period: 498.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 741.80

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Ms Meghan McArdle
Mailing Address 171 Rosemont St
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement: Consultant Fee - 2 weeks
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.6918
Date of Disbursement: 07 / 02 / 2004
Amount of Each Disbursement this Period: 600.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Ms Meghan McArdle
Mailing Address 171 Rosemont St
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement: consultant fee - 2 weeks
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.6953
Date of Disbursement: 07 / 16 / 2004
Amount of Each Disbursement this Period: 600.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Ms Meghan McArdle
Mailing Address 171 Rosemont St
City: Albany | State: NY | Zip Code: 12206
Purpose of Disbursement: Consultant fee - 2 weeks
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7048
Date of Disbursement: 07 / 30 / 2004
Amount of Each Disbursement this Period: 600.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1800.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Ms Meghan McArdle

Mailing Address 171 Rosemont St

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee - 2 weeks
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7077
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 600.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Ms. Erin McTieman

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Consultant fee - 2 weeks
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6920
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 600.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Ms. Erin McTieman

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee - 2 weeks
Category/Type: 001
Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6959
Date of Disbursement: 07 / 21 / 2004

Amount of Each Disbursement this Period: 420.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1620.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ms. Erin McTiernan

Mailing Address 296 Western Ave

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7052
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 560.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Melissa Data.com

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name: Friends of Howard Mille

Category/Type: 003

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6937
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mercury Public Affairs

Mailing Address 137 Fifth Avenue 3rd Floor

City: New York | State: NY | Zip Code: 10010

Purpose of Disbursement: June & July

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6957
Date of Disbursement: 07 / 20 / 2004

Amount of Each Disbursement this Period: 20000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 21260.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 459 West St

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6921
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

001 Category/ Type

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

Mailing Address 459 West St

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6947
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

001 Category/ Type

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

Mailing Address 459 West St

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7045
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶ 2700.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 459 West St

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7079
Date of Disbursement: 06 / 13 / 2004

Amount of Each Disbursement this Period: 900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mr Alex Novicki

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6922
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Mr Alex Novicki

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee -

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6946
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2900.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Mr Alex Novicki

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: Consultant fee - 2 weeksp

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7042
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Mr Alex Novicki

Mailing Address 459 West Street

City: Albany | State: NY | Zip Code: 12206

Purpose of Disbursement: consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7080
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 149 Daffodil Drive

City: Horseheads | State: NY | Zip Code: 14845

Purpose of Disbursement: consultant fee - 2 weeks

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6923
Date of Disbursement: 07 / 04 / 2004

Amount of Each Disbursement this Period: 650.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2650.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 149 Daffodil Drive

City: Horseheads | State: NY | Zip Code: 14845

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6949
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 149 Daffodil Drive

City: Horseheads | State: NY | Zip Code: 14845

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7043
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 700.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 149 Daffodil Drive

City: Horseheads | State: NY | Zip Code: 14845

Purpose of Disbursement: consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7081
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2400.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Ms Caroline Quartararo

Mailing Address 27 Woodlake Rd
Apt 5

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6930
Date of Disbursement: 07 / 06 / 2004

Amount of Each Disbursement this Period: 7500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Ms Caroline Quartararo

Mailing Address 27 Woodlake Rd
Apt 5

City: Albany | State: NY | Zip Code: 12203

Purpose of Disbursement: consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6970
Date of Disbursement: 07 / 27 / 2004

Amount of Each Disbursement this Period: 7500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 24 Chestnut Street

City: Amsterdam | State: NY | Zip Code: 12010

Purpose of Disbursement: Consultant fee

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6924
Date of Disbursement: 07 / 04 / 2004

Amount of Each Disbursement this Period: 2500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 17500.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement: Consultant fee

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.6925
Date of Disbursement: 07 / 02 / 2004

Amount of Each Disbursement this Period: 1250.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement: Travel reimbursment

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 002

Transaction ID: SB17.6927
Date of Disbursement: 07 / 06 / 2004

Amount of Each Disbursement this Period: 189.85

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement: Travel Reimbursement

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 002

Transaction ID: SB17.6928
Date of Disbursement: 07 / 08 / 2004

Amount of Each Disbursement this Period: 1629.21

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3069.06

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement:

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6945
Date of Disbursement: 07 / 15 / 2004

Amount of Each Disbursement this Period: 863.66

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement: consultant fee 2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6950
Date of Disbursement: 07 / 16 / 2004

Amount of Each Disbursement this Period: 1250.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement: Consultant fee - 2 weeks

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7041
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 1250.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3363.66

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement
Travel Reimbursment

Candidate Name
Friends of Howard Mills

001 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7057
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 146.08

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement
consultant fee - 2 weeks

Candidate Name
Friends of Howard Mills

001 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7082
Date of Disbursement: 08 / 13 / 2004

Amount of Each Disbursement this Period: 1250.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 3 Central Ave
Apt 3W

City: Albany | State: NY | Zip Code: 12210

Purpose of Disbursement
travel reimbursment

Candidate Name
Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.7131
Date of Disbursement: 08 / 19 / 2004

Amount of Each Disbursement this Period: 452.83

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1848.91

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 73 / 93

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Jon Sorensen

Mailing Address 122 Green Ave

City: Castleton | State: NY | Zip Code: 12033

Purpose of Disbursement: speech prep (LCA)

Candidate Name: Friends of Howard Mills

007 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6996
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
The Alcher Printing Group

Mailing Address 599 Pawling Avenue

City: Troy | State: NY | Zip Code: 12180

Purpose of Disbursement: 6/30 FR invite reorder

Candidate Name: Friends of Howard Mills

007 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6996
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 724.37

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
The Alcher Printing Group

Mailing Address 599 Pawling Avenue

City: Troy | State: NY | Zip Code: 12180

Purpose of Disbursement: 6/30 FR invitations

Candidate Name: Friends of Howard Mills

007 Category/Type

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6997
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 1245.99

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2470.36

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
The Douglaston Club, Inc.

Mailing Address 600 West Drive

City: Douglaston | State: NY | Zip Code: 11363

Purpose of Disbursement: FR expense

Category/Type: 007

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6976
Date of Disbursement: 07 / 23 / 2004

Amount of Each Disbursement this Period: 1786.23

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
The Second Amendment Show

Mailing Address 100 Boardman Street

City: Rochester | State: NY | Zip Code: 14607

Purpose of Disbursement: 2 months radio buy

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7058
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 320.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: credit card machine

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6938
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 398.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2504.23

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: Credit card (CC)

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Category/Type: D06

Transaction ID: SB17.6961
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 1222.19

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: Finance charge

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Category/Type: D01

Transaction ID: SB17.6961.2
Date of Disbursement: 06 / 18 / 2004

Amount of Each Disbursement this Period: 11.66

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: previous balance

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

Category/Type: D01

Transaction ID: SB17.6961.3
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 1097.56

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 1222.19

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: credit card (MG)

Candidate Name: Friends of Howard Mills

Category/Type: 002

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6962
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 431.62

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Walmart

Mailing Address 141 Washington Ave Extension

City: Albany | State: NY | Zip Code: 12205

Purpose of Disbursement:

Candidate Name: Friends of Howard Mills

Category/Type: 005

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6962.1
Date of Disbursement: 06 / 01 / 2004

Amount of Each Disbursement this Period: 4.82

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: credit card (JR)

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6963
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 850.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1282.02

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
WYND Communications
Mailing Address
City State Zip Code
Purpose of Disbursement
Blackberry
Candidate Name
Friends of Howard Mills
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
001 Category/ Type
Transaction ID: SB17.6963.3
Date of Disbursement: 06 / 04 / 2004
Amount of Each Disbursement this Period: 145.04
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
American Airlines
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Friends of Howard Mills
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
002 Category/ Type
Transaction ID: SB17.6963.7
Date of Disbursement: 06 / 16 / 2004
Amount of Each Disbursement this Period: 183.60
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
Trustco Bank
Mailing Address P.O. Box 908
City Schenectady State NY Zip Code 12301
Purpose of Disbursement
Credit Card (HM)
Candidate Name
Friends of Howard Mills
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
003 Category/ Type
Transaction ID: SB17.7068
Date of Disbursement: 07 / 28 / 2004
Amount of Each Disbursement this Period: 2012.49
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2012.49

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1440 Central Ave

City: Albany | State: NY | Zip Code:

Purpose of Disbursement: office expense

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.1
Date of Disbursement: 06 / 17 / 2004

Amount of Each Disbursement this Period: 127.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1440 Central Ave

City: Albany | State: NY | Zip Code:

Purpose of Disbursement: office supplies

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.4
Date of Disbursement: 06 / 28 / 2004

Amount of Each Disbursement this Period: 137.21

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Candidate Name: Friends of Howard Mills

Category/Type: 003

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.9
Date of Disbursement: 07 / 03 / 2004

Amount of Each Disbursement this Period: 11.93

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.10
Date of Disbursement: 07 / 03 / 2004

Amount of Each Disbursement this Period: 16.65

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.11
Date of Disbursement: 07 / 03 / 2004

Amount of Each Disbursement this Period: 11.93

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type:

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.12
Date of Disbursement: 07 / 03 / 2004

Amount of Each Disbursement this Period: 103.35

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.13
Date of Disbursement: 07 / 03 / 2004

Amount of Each Disbursement this Period: 10.98

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1440 Central Ave

City: Albany | State: NY | Zip Code:

Purpose of Disbursement: office supplies

Category/Type: 001

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.14
Date of Disbursement: 07 / 07 / 2004

Amount of Each Disbursement this Period: 69.69

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.15
Date of Disbursement: 07 / 09 / 2004

Amount of Each Disbursement this Period: 14.15

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.17
Date of Disbursement: 07 / 12 / 2004

Amount of Each Disbursement this Period: 24.86

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.18
Date of Disbursement: 07 / 12 / 2004

Amount of Each Disbursement this Period: 39.33

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FedEx

Mailing Address P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Purpose of Disbursement: shipping

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7068.19
Date of Disbursement: 07 / 12 / 2004

Amount of Each Disbursement this Period: 21.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Econolodge

Transaction ID: SB17.7068.24
Date of Disbursement: 07 / 19 / 2004

Mailing Address

City: Canandagula | State: NY | Zip Code:

Amount of Each Disbursement this Period: 209.42

Purpose of Disbursement: travel expenses

Category/Type: 002

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

B. Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: SB17.7068.25
Date of Disbursement: 07 / 19 / 2004

Mailing Address: P.O. Box 371461

City: Pittsburg | State: PA | Zip Code: 15250

Amount of Each Disbursement this Period: 16.61

Purpose of Disbursement: shipping

Category/Type: 003

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Transaction ID: SB17.7068.26
Date of Disbursement: 07 / 20 / 2004

Mailing Address: P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Amount of Each Disbursement this Period: 29.00

Purpose of Disbursement: late fee

Category/Type: 001

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004
[X] Primary [ ] General
[ ] Other (specify)

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 83 / 93

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: JR credit card

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7063
Date of Disbursement: 08 / 16 / 2004

Amount of Each Disbursement this Period: 587.41

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: Matt Schmidt Credit Card

Candidate Name: Friends of Howard Mills

Category/Type: 002

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7103
Date of Disbursement: 06 / 19 / 2004

Amount of Each Disbursement this Period: 945.54

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Hampton Inn

Mailing Address 20 Crystal Run Crossing

City: Middletown | State: NY | Zip Code: 10941

Purpose of Disbursement: Travel Expense - hotel

Candidate Name: Friends of Howard Mills

Category/Type: 002

Office Sought: [ ] House [X] Senate [ ] President — State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7103.0
Date of Disbursement: 06 / 29 / 2004

Amount of Each Disbursement this Period: 128.82

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 1532.95

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Walmart

Mailing Address 141 Washington Ave Extension

City: Albany | State: NY | Zip Code: 12205

Purpose of Disbursement: misc. travel supplies

Candidate Name: Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7103.7
Date of Disbursement: 07 / 06 / 2004

Amount of Each Disbursement this Period: 10.22

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Radisson Hotel

Mailing Address

City: Utica | State: NY | Zip Code:

Purpose of Disbursement: travel expense - lodging

Candidate Name: Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7103.10
Date of Disbursement: 07 / 10 / 2004

Amount of Each Disbursement this Period: 133.58

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
Radisson Hotel

Mailing Address

City: Utica | State: NY | Zip Code:

Purpose of Disbursement: travel expense - lodging

Candidate Name: Friends of Howard Mills

002 Category/ Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7103.11
Date of Disbursement: 07 / 10 / 2004

Amount of Each Disbursement this Period: 150.54

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
Radisson Hotel
Mailing Address
City: Utica | State: NY | Zip Code:
Purpose of Disbursement: misc. travel expense
Candidate Name: Friends of Howard Mills
Category/Type: 002
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7103.12
Date of Disbursement: 07 / 10 / 2004
Amount of Each Disbursement this Period: 2.17
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Radisson Hotel
Mailing Address
City: Utica | State: NY | Zip Code:
Purpose of Disbursement: travel expense - lodging
Candidate Name: Friends of Howard Mills
Category/Type: 002
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7103.13
Date of Disbursement: 07 / 12 / 2004
Amount of Each Disbursement this Period: 214.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
Trustco Bank
Mailing Address: P.O. Box 908
City: Schenectady | State: NY | Zip Code: 12301
Purpose of Disbursement: Credit card - CC
Candidate Name: Friends of Howard Mills
Category/Type: 001
Office Sought: [ ] House [X] Senate [ ] President
State: NY District:
Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: SB17.7129
Date of Disbursement: 08 / 19 / 2004
Amount of Each Disbursement this Period: 200.36
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 200.36

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 18a [ ] 18b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: postage (Albany Co FR)

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6940
Date of Disbursement: 07 / 09 / 2004

Amount of Each Disbursement this Period: 37.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: postage

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6941
Date of Disbursement: 07 / 12 / 2004

Amount of Each Disbursement this Period: 370.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: business reply account

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6958
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 100.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 507.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: postage

Candidate Name: Friends of Howard Mills

003 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6971
Date of Disbursement: 07 / 28 / 2004

Amount of Each Disbursement this Period: 555.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: Postage

Candidate Name: Friends of Howard Mills

001 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7070
Date of Disbursement: 07 / 29 / 2004

Amount of Each Disbursement this Period: 115.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: Postage

Candidate Name: Friends of Howard Mills

003 Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7080
Date of Disbursement: 07 / 30 / 2004

Amount of Each Disbursement this Period: 185.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 855.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: Postage

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7061
Date of Disbursement: 08 / 06 / 2004

Amount of Each Disbursement this Period: 185.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: Blake mailing postage

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7672
Date of Disbursement: 08 / 23 / 2004

Amount of Each Disbursement this Period: 740.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address Hudson Street

City: Albany | State: NY | Zip Code: 12201

Purpose of Disbursement: campaign material postage

Category/Type: 003

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.7839
Date of Disbursement: 08 / 25 / 2004

Amount of Each Disbursement this Period: 29.05

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 954.05

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 89 / 93

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A.
Full Name (Last, First, Middle Initial)
X-Press Info Solutions

Mailing Address 75 Champlain Street

City: Albany | State: NY | Zip Code: 12204

Purpose of Disbursement: Business cards

003 Category/Type

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6964
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 193.77

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
X-Press Info Solutions

Mailing Address 75 Champlain Street

City: Albany | State: NY | Zip Code: 12204

Purpose of Disbursement: Albany Co FR supplies

007 Category/Type

Candidate Name: Friends of Howard Mills

Office Sought: [ ] House [X] Senate [ ] President
State: NY District:

Disbursement For: 2004 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.6985
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 395.11

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	588.88
TOTAL This Period (last page this line number only) ▶	175845.91

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☒ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Friends of Jim Wright

Mailing Address P.O. Box 704

City: Watertown | State: NY | Zip Code: 13601

Purpose of Disbursement
donation refund (excess)

Candidate Name
Friends of Howard Mills

001
Category/ Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify)

Transaction ID: SB20C.7840
Date of Disbursement: 08 / 25 / 2004

Amount of Each Disbursement this Period: 750.00

☒ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	750.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: credit card maint. fee

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7849
Date of Disbursement: 07 / 06 / 2004

Amount of Each Disbursement this Period: 5.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: returned contrib & fee (closed accout)

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7851
Date of Disbursement: 07 / 19 / 2004

Amount of Each Disbursement this Period: 50.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady | State: NY | Zip Code: 12301

Purpose of Disbursement: check order

Candidate Name: Friends of Howard Mills

Category/Type: 001

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7853
Date of Disbursement: 07 / 21 / 2004

Amount of Each Disbursement this Period: 18.12

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 73.12

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady State: NY Zip Code: 12301

Purpose of Disbursement: stop payment fee

Candidate Name: Friends of Howard Mills

001 - Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7855
Date of Disbursement: 07 / 21 / 2004

Amount of Each Disbursement this Period: 25.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady State: NY Zip Code: 12301

Purpose of Disbursement: redeposit item

Candidate Name: Friends of Howard Mills

001 - Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7857
Date of Disbursement: 07 / 22 / 2004

Amount of Each Disbursement this Period: 10.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady State: NY Zip Code: 12301

Purpose of Disbursement: service charge

Candidate Name: Friends of Howard Mills

001 - Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7860
Date of Disbursement: 07 / 31 / 2004

Amount of Each Disbursement this Period: 32.47

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	67.47
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Howard Mills

A. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 909

City: Schenectady State: NY Zip Code: 12301

Purpose of Disbursement: service charge

Candidate Name: Friends of Howard Mills

001 Category/ Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7863
Date of Disbursement: 07 / 31 / 2004

Amount of Each Disbursement this Period: 24.75

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Trustco Bank

Mailing Address P.O. Box 908

City: Schenectady State: NY Zip Code: 12301

Purpose of Disbursement: july credit card cut

Candidate Name: Friends of Howard Mills

001 Category/ Type

Office Sought: ☐ House ☒ Senate ☐ President
State: NY District:

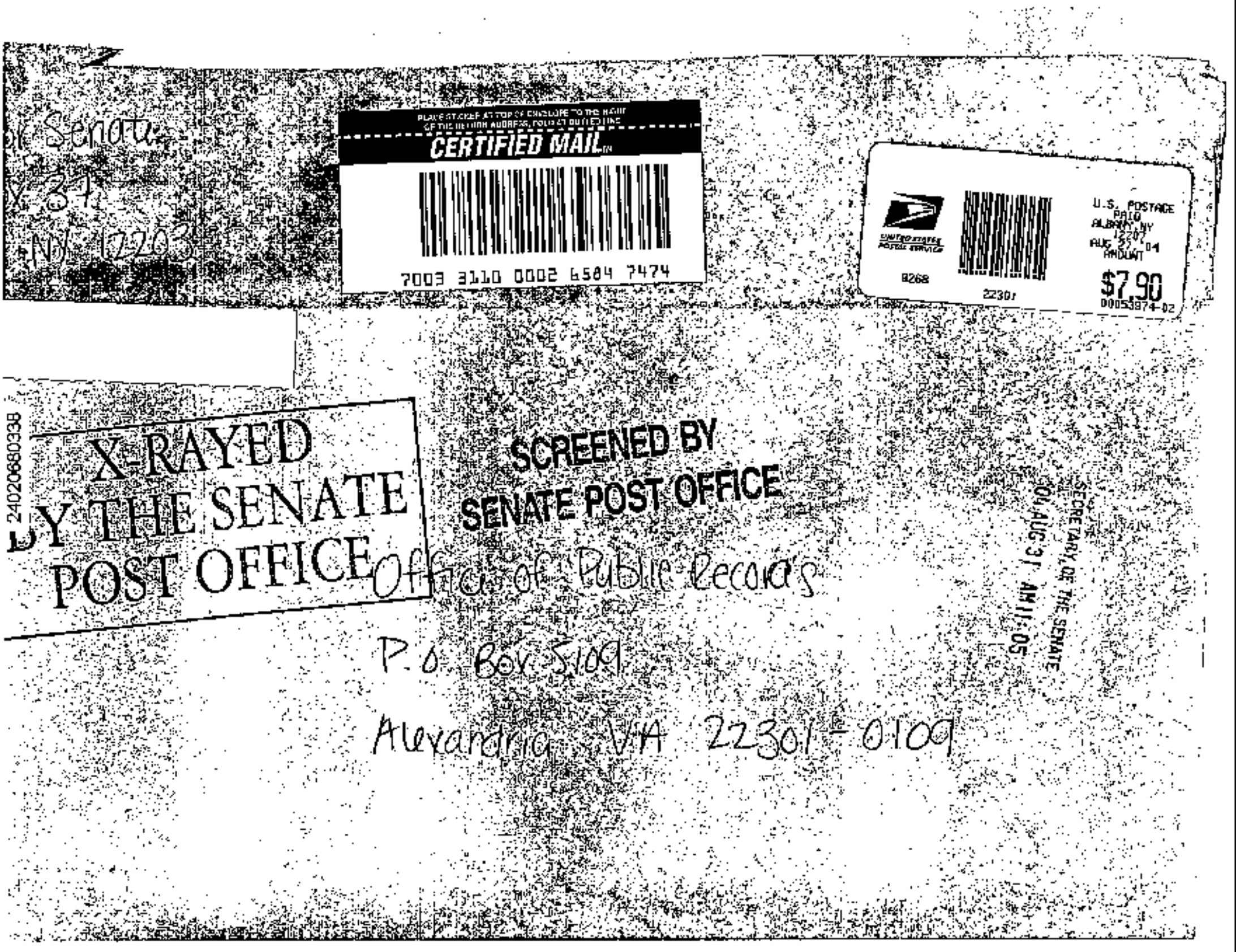
Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: SB21.7862
Date of Disbursement: 08 / 01 / 2004

Amount of Each Disbursement this Period: 5.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	29.75
TOTAL This Period (last page this line number only) ▶	170.34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EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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Date of Receipt

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Date of Receipt

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_____ **FEDERAL EXPRESS**
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Date of Receipt

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Date of Receipt

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_____**OTHER**_____
Date of Receipt

RD 08-31-04
Preparer **Date Prepared**