



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Christopher R. Wight for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	14500.00	88721.78
(b) Total Contribution Refunds (from Line 20(d)) .....	150.00	150.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14350.00	88571.78
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	16030.78	92437.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	10.88	927.87
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16019.90	91509.53
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	5909.19	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	10236.94	

**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 12/2003)

Write or Type Committee Name

**Christopher R. Wight for Congress**

Report Covering the Period: From:  /  /  To:  /  /

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).....	13500.00	72529.78
(ii) Unitemized.....	1000.00	12382.00
(iii) TOTAL of contributions from individuals ▶	14500.00	84911.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	2810.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14500.00	88721.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	10683.15
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10683.15
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	10.88	927.87
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	14510.88	100332.80

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16030.78	92437.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	1390.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	223.61	446.21
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	223.61	446.21
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	150.00	150.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	150.00	150.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	16404.39	94423.61

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7802.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14510.88
25. SUBTOTAL (add Line 23 and Line 24).....	22313.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16404.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5909.19

**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 5 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Abramowitz**

Mailing Address P.O. box 958

City Southport State CT Zip Code 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer NGN Capital Occupation Analyst

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 02 / 2012**

**Transaction ID : SA11AI.5166**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Anastasios Belesis**

Mailing Address 14 Wall Street

City New York State NY Zip Code 10005

FEC ID number of contributing federal political committee. **C**

Name of Employer John Thomas Financial Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 11 / 2012**

**Transaction ID : SA11AI.5212**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Roberta Chapey**

Mailing Address 501 East 79th Street, Apt. 5E

City New York State NY Zip Code 10075

FEC ID number of contributing federal political committee. **C**

Name of Employer City University of NY Occupation Professor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 10 / 2012**

**Transaction ID : SA11AI.5210**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

**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 6 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stewart Clifford**

Mailing Address 120 East End Ave, Apt. 12C

City New York State NY Zip Code 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : SA11AI.5192**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Connolly**

Mailing Address 333 West 56th Street

City New York State NY Zip Code 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer Via Novus Capital Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012

**Transaction ID : SA11AI.5203**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Feeley**

Mailing Address 117 East 37th Street

City New York State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11AI.5185**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 30  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Gimbel**

Mailing Address 120 East 79th Street

City State Zip Code  
New York NY 10075

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
S.S. Steiner, Inc. Director

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 04 / 2012

**Transaction ID : SA11AI.5179**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Alan Goldman**

Mailing Address 301 East 64th Street, Apt. 6H

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 04 / 2012

**Transaction ID : SA11AI.5171**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Alan Goldman**

Mailing Address 301 East 64th Street, Apt. 6H

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Attorney

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5206**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

**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 8 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Horrocks**

Mailing Address 125 East 84th Street

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Credit Suisse Executive

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : SA11AI.5194**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Curtis Katz**

Mailing Address 29 Barstow Road

City State Zip Code  
Great Neck NY 11021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Talon Air Executive

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012

**Transaction ID : SA11AI.5197**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Brenda Landrum**

Mailing Address 220 East 65th Street, Apt. 18J

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Pianist

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2012

**Transaction ID : SA11AI.5163**

Amount of Each Receipt this Period  
250.00

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

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

2250.00



**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 9 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Doug Lindemann**

Mailing Address 840 FM 2224

City State Zip Code  
Holliday TX 76366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Drilling

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5195**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Lister**

Mailing Address 133 East 80th Street, Apt. 4A

City State Zip Code  
New York NY 10075

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Permira Advisors Managing Partner

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5201**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Andrea Masano**

Mailing Address 201 East 69th Street, Apt. 12E

City State Zip Code  
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Clothing design/mfg

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5205**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

**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 10 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Morgan**

Mailing Address 55 East End Ave #6K

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Emmet Marvin & Martin LLP Attorney

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 09 / 2012

**Transaction ID : SA11AI.5189**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Maria Patterson**

Mailing Address 162 East 66th Street

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Homemaker

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2012

**Transaction ID : SA11AI.5188**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Price**

Mailing Address 25 East 86th Street, Apt. 8D

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Price Communications Executive

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2012

**Transaction ID : SA11AI.5186**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lenora Pusta**

Mailing Address 138 West Sunflower Drive

City Payson State AZ Zip Code 85541

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2012

**Transaction ID : SA11A1.5161**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**John Ross**

Mailing Address 830 Park Avenue, Apt. 11B

City New York State NY Zip Code 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11A1.5216**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Sagansky**

Mailing Address 53 East 80th Street

City New York State NY Zip Code 10075

FEC ID number of contributing federal political committee. **C**

Name of Employer Global Eagle Acquisition Occupation President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11A1.5220**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carla Stearns**

Mailing Address 160 East 66th Street

City State Zip Code  
New York NY 10065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
New Yorkers for Growth Executive Director

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5207**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Vincent Tabone**

Mailing Address 4535 215th Street

City State Zip Code  
Bayside NY 11361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self employed attorney

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 10 / 2012

**Transaction ID : SA11AI.5208**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Timothy Taft**

Mailing Address 40 East 75th Street, Apt. 2B

City State Zip Code  
New York NY 10021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Investor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 09 / 2012

**Transaction ID : SA11AI.5191**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 13 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Vissicchio**

Mailing Address 129 East 10th Street

City State Zip Code  
New York NY 10013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-employed Consultant

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 05 / 2012

**Transaction ID : SA11AI.5183**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**James Wintersteen**

Mailing Address 27 Myrtle Avenue

City State Zip Code  
Mill Valley CA 94941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NA Retired

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2012

**Transaction ID : SA11AI.5175**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

13500.00

**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)		PAGE 14 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 1280 Lexington Avenue		Amount of Each Disbursement this Period 32.65
City New York	State NY	
Zip Code 10028	Purpose of Disbursement offices supplies & equipment	Transaction ID : SB17.5288
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jordan Crehan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 211 East 70th Street Apt. 12E		Amount of Each Disbursement this Period 140.00
City New York	State NY	
Zip Code 10021	Purpose of Disbursement general campaign consulting	Transaction ID : SB17.5227
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jordan Crehan</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 211 East 70th Street Apt. 12E		Amount of Each Disbursement this Period 340.00
City New York	State NY	
Zip Code 10021	Purpose of Disbursement general campaign consulting	Transaction ID : SB17.5234
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	512.65
<b>TOTAL</b> 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 15 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>3.04</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5243</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>16.90</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5248</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>12.34</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5252</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>32.28</b>
<b>TOTAL</b> 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 16 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>44.73</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5256</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>15.86</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5259</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>7.61</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5263</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>68.20</b>
<b>TOTAL</b> 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 17 OF 30		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>7.45</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5276</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>11.36</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5286</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>14.84</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5291</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>33.65</b>
<b>TOTAL</b> 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 18 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. D'Agostino</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2012</b>
Mailing Address 1233 Lexington Avenue		Amount of Each Disbursement this Period <b>12.51</b>
City New York	State NY	
Zip Code 10028	Purpose of Disbursement food and beverages	<b>Transaction ID : SB17.5296</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1122 Lexington Avenue		Amount of Each Disbursement this Period <b>14.68</b>
City New York	State NY	
Zip Code 10021	Purpose of Disbursement copying	<b>Transaction ID : SB17.5284</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period <b>200.00</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement internet advertising	<b>Transaction ID : SB17.5290</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>227.19</b>
<b>TOTAL</b> 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 19 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2012</b>
Mailing Address <b>1600 Amphitheatre Parkway</b>		Amount of Each Disbursement this Period <b>350.00</b>
City <b>Mountain View</b> State <b>CA</b> Zip Code <b>94043</b>	Purpose of Disbursement <b>internet advertising</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.5297</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Elliott Koch</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address <b>120 East End Ave Apt. 12C</b>		Amount of Each Disbursement this Period <b>1125.00</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10028</b>	Purpose of Disbursement <b>general campaign consulting</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.5236</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Liberty Mutual</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2012</b>
Mailing Address <b>175 Berkeley Street</b>		Amount of Each Disbursement this Period <b>173.35</b>
City <b>Boston</b> State <b>MA</b> Zip Code <b>02116</b>	Purpose of Disbursement <b>insurance for campaign vehicle</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.5251</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1648.35</b>
<b>TOTAL</b> 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 20 OF 30		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailchimp.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 512 Means Street Suite 404		Amount of Each Disbursement this Period 75.00
City Atlanta	State GA Zip Code 30318	
Purpose of Disbursement email services	Candidate Name	Transaction ID : SB17.5258
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Metropolitan Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 122 East 83rd Street		Amount of Each Disbursement this Period 250.00
City New York	State NY Zip Code 10028	
Purpose of Disbursement campaign office rent	Candidate Name	Transaction ID : SB17.5228
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Metropolitan Republican Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 122 East 83rd Street		Amount of Each Disbursement this Period 300.00
City New York	State NY Zip Code 10028	
Purpose of Disbursement campaign office rent	Candidate Name	Transaction ID : SB17.5235
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	625.00
<b>TOTAL</b> 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 21 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. New York City Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 32-02 Queens Boulevard		Amount of Each Disbursement this Period 53.80
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement local transportation	Transaction ID : SB17.5272
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. New York City Taxi</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 32-02 Queens Boulevard		Amount of Each Disbursement this Period 49.30
City Long Island City	State NY	
Zip Code 11101	Purpose of Disbursement local transportation	Transaction ID : SB17.5300
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2012
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 30.00
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement pay flow pro fee to accept credit cards online	Transaction ID : SB17.5271
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	133.10
<b>TOTAL</b> 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 22 OF 30		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 218.06
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement paypal transaction fees Oct 1 - 17	<b>Transaction ID : SB17.5306</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Plaza 48 Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 329-341 East 48th Street		Amount of Each Disbursement this Period 500.00
City New York	State NY	
Zip Code 10017	Purpose of Disbursement internet advertising	<b>Transaction ID : SB17.5302</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Redball Parking Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 770 Lexington Avenue		Amount of Each Disbursement this Period 685.41
City New York	State NY	
Zip Code 10065	Purpose of Disbursement parking for campaign vehicle	<b>Transaction ID : SB17.5238</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1403.47
<b>TOTAL</b> 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 23 OF 30		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Rose Color Printers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 8 N 14TH AVE		Amount of Each Disbursement this Period 2123.06
City Mt. Vernon	State NY	
Zip Code 10550	Purpose of Disbursement signs	Transaction ID : SB17.5255
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rose Color Printers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 8 N 14TH AVE		Amount of Each Disbursement this Period 2177.50
City Mt. Vernon	State NY	
Zip Code 10550	Purpose of Disbursement signs	Transaction ID : SB17.5275
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 1855 First Avenue		Amount of Each Disbursement this Period 73.79
City New York	State NY	
Zip Code 10128	Purpose of Disbursement gas for campaign vehicle	Transaction ID : SB17.5257
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4374.35
<b>TOTAL</b> 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 24 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address <b>1280 Lexington Avenue</b>		Amount of Each Disbursement this Period <b>120.83</b> <b>Transaction ID : SB17.5287</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10128</b>	Purpose of Disbursement <b>offices supplies &amp; equipment</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vincent Tabone</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 09 / 2012</b>
Mailing Address <b>4535 215th Street</b>		Amount of Each Disbursement this Period <b>1250.00</b> <b>Transaction ID : SB17.5231</b>
City <b>Bayside</b> State <b>NY</b> Zip Code <b>11361</b>	Purpose of Disbursement <b>legal consulting</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shashank Tripathi</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2012</b>
Mailing Address <b>252 12th Street Apt. 2E</b>		Amount of Each Disbursement this Period <b>3500.00</b> <b>Transaction ID : SB17.5233</b>
City <b>Brooklyn</b> State <b>NY</b> Zip Code <b>11215</b>	Purpose of Disbursement <b>general campaign consulting</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4870.83</b>
<b>TOTAL</b> 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 25 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 15 / 2012</b>
Mailing Address <b>40 West Street</b>		Amount of Each Disbursement this Period <b>1289.12</b>
City <b>New York</b> State <b>NY</b> Zip Code <b>10006</b>	Purpose of Disbursement <b>telecommunications</b>	
Candidate Name		<b>Transaction ID : SB17.5295</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. VoiceBroadcasting.com</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2012</b>
Mailing Address <b>1527 South Cooper Street</b>		Amount of Each Disbursement this Period <b>145.11</b>
City <b>Arlington</b> State <b>TX</b> Zip Code <b>76010</b>	Purpose of Disbursement <b>automated calls</b>	
Candidate Name		<b>Transaction ID : SB17.5242</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. VoiceBroadcasting.com</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2012</b>
Mailing Address <b>1527 South Cooper Street</b>		Amount of Each Disbursement this Period <b>46.32</b>
City <b>Arlington</b> State <b>TX</b> Zip Code <b>76010</b>	Purpose of Disbursement <b>automated calls</b>	
Candidate Name		<b>Transaction ID : SB17.5249</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1480.55</b>
<b>TOTAL</b> 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 26 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Christopher Robin Wight</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2012
Mailing Address 120 East 90th Street Apt. 16D		Amount of Each Disbursement this Period 38.35
City New York	State NY	
Zip Code 10128	Purpose of Disbursement interest on loan from candidate	Transaction ID : SB17.5307
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 12	

Full Name (Last, First, Middle Initial) <b>B. Carlisle Williams</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2012
Mailing Address 48 Commerce Street Apt. 4R		Amount of Each Disbursement this Period 87.00
City New York	State NY	
Zip Code 10014	Purpose of Disbursement reimbursement for advertisting expense	Transaction ID : SB17.5232
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.35
<b>TOTAL</b> This Period (last page this line number only).....	15534.97

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5232

\$87 paid to Facebook, 1601 Willow Road, Menlo Park CA 94025 for advertising

Form/Schedule:

Transaction ID:

**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 28 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Christopher R. Wight for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Christopher Robin Wight</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2012</b>
Mailing Address 120 East 90th Street Apt. 16D		Amount of Each Disbursement this Period <b>223.61</b>
City New York State NY Zip Code 10128	Purpose of Disbursement loan principal repayment	
Candidate Name	Category/Type	<b>Transaction ID : SB19A.5309</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>223.61</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>223.61</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Christopher R. Wight for Congress** Transaction ID : **SC/10.4212**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Robin Wight**

Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
120 East 90th Street  
Apt. 16D

City State ZIP Code  
New York NY 10128

Original Amount of Loan 2000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: M 02 / D 10 / Y 2012  
Date Due: M / D / Y open  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 2000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Christopher R. Wight for Congress** Transaction ID : **SC/10.5152**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Robin Wight**

Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
120 East 90th Street  
Apt. 16D

City State ZIP Code  
New York NY 10128

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
8683.15	446.21	8236.94

**TERMS**

Date Incurred: M 07 / D 24 / Y 2012  
 Date Due: M / D / Y 7/23/2015  
 Interest Rate: 5.44 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	8236.94
<b>TOTALS</b> This Period (last page in this line only).....	10236.94

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**