

★★★★
GOLKIN
U.S. CONGRESS

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
CONGRESS 2000 COMMITTEE
20 Angus Lane
Warren, New Jersey 07059
2000 JAN 31 A 11:30
Tele: (908) 604-0515
Fax: (908) 604-0550

January 28, 2000

VIA EXPRESS MAIL

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

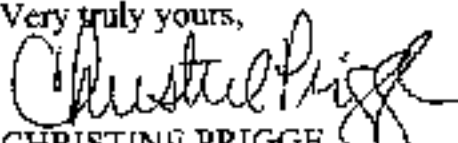
Re: FEC Identification No. C00342147

Dear Sir or Madam:

Enclosed for filing with the Federal Election Commission please find FEC Form 3 along with Schedules A, B and C in connection with the referenced FEC Identification Number.

If you have any questions, please do not hesitate to contact Maureen Young, Treasurer for the Golkin for Congress 2000 Committee at the above address.

Very truly yours,


CHRISTINE PRIGGE
Special Assistant

/cp

Enclosures

cc: (Via Express Mail)
Department of Law and Public Safety
Division of Elections
Justice Complex
P.O. Box 304
Trenton, New Jersey 08625-0304
Attention: Sharon Young, Director

Campaign Headquarters • 14 Hamilton Street • Bound Brook, NJ 08805 • Tel: 732-302-9600

Paid for by the Golkin for Congress 2000 Committee • Maureen Young, Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 31 A 11:34

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) GOLKIN FOR CONGRESS 2000		2. FEC IDENTIFICATION NUMBER C00342147
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 20 ANGUS LANE		
CITY, STATE and ZIP CODE WARREN, NEW JERSEY 07059	STATE/DISTRICT NJ/7th	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

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

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/99</u> through <u>12/31/99</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$34,825	\$41,686
(b) Total Contribution Refunds (from Line 20(d))	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	34,825	41,686
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11,873.22	12,889.11
(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	-0-
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	11,873.22	12,889.11
8. Cash on Hand at Close of Reporting Period (from Line 27)	125,951.89	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	100,000.00	

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 MAUREEN T. YOUNG	Date 1/28/00
Signature of Treasurer <i>Maureen T. Young</i>	

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

--	--	--	--	--	--	--	--

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) GOLKIN FOR CONGRESS 2000	Report Covering the Period:	
	From: 7/1/99	To: 12/31/99
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) -----	30,450	
(ii) Unitemized -----	3,625	
(iii) Total of contributions from individuals -----	34,075	40,725
(b) Political Party Committees -----	500	500
(c) Other Political Committees (such as PACs) -----	250	250
(d) The Candidate -----		211
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	34,825	41,686
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	-0-	-0-
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----	100,000	100,000
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----	100,000	100,000
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	-0-	-0-
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	-0-	-0-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	134,825	141,686
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	11,873.22	12,889.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	-0-	-0-
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----		
(b) Of All Other Loans -----		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	-0-	-0-
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----		
(b) Political Party Committees -----		
(c) Other Political Committees (such as PACs) -----		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	-0-	-0-
21. OTHER DISBURSEMENTS -----	1,020-	2,845-
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	12,893.22	15,734.11

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 4,020.11	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 134,825.00	
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 138,845.11	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 12,893.22	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 125,951.89	

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Contributions from Individuals/Persons other than Political Committees

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Black 8801 Shore Road Brooklyn, NY 11209	Retired	7/2/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul E. Raether 56 Harbor Drive Belle Haven, CT 06830	Kohlberg Kravis & Roberts & Co.	7/21/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Henry Kravis 9 West 57th Street New York, NY 10019	Kohlberg Kravis & Roberts & Co.	7/21/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Wiedemann 11 Busy Bee Lane Warren, NJ 07059-7009	Student	8/26/99	\$ 150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Student	Aggregate Year-to-Date > \$ 350-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Perry Golkin 14 East 90th Street New York NY 10128	Kohlberg Kravis & Roberts & Co.	9/13/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donna Golkin 14 East 90th Street New York NY 10128	Homemaker	9/13/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Santoro 17 Manning Drive East Northport, NY 11731	J&A Systems, Inc.	9/17/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Operator	Aggregate Year-to-Date > \$ 250	

SUBTOTAL of Receipts This Page (optional)

\$4,400-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons other than Political Committees

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

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

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

NAME OF COMMITTEE (In Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Teresa Abbate 1772 Marine Parkway Brooklyn, NY 11234	Retired	9/18/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 550	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael T. Takarz 15 Linden Drive Purchase, NY 10577	Kohlberg Kravis Roberts & Co.	9/18/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Merchant Banker	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Salvatore Badalamenti 15 Pheasant Lane Scotch Plains, NJ 07076	Kohlberg Kravis Roberts & Co.	9/18/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Merchant Banker	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Barasch 62-48 83rd Street Middle Village, NY 11379-1906	Island Charter	9/23/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Bus Dispatcher	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John P. Rooney 963 Spring Run Lane Martinsville, NJ 08836	SCO	9/23/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Computer Consultant	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marc D. Zisselman 124 West 60th Street New York, NY 10036	Self-employed	10/5/99	\$ 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chikako Tomida 201 East 80th Street New York NY 10021	Stephanie Manhattan, Inc.	10/5/99	\$1,000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate Broker	Aggregate Year-to-Date > \$ 2,000	

SUBTOTAL of Receipts This Page (optional)

\$4,250

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/ ~~Persons other than~~ Political Committees

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

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

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

NAME OF COMMITTEE (In Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maureen Young 6 Upper Warren Way Warren, NJ 07059	Retired	10/5/99	\$ 100
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$600	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Mazzella 1255 Myrtle Avenue San Diego, CA 92103	Retired	10/5/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$ 250	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Fitzsimmons 23 Winslow Drive Martinsville, NJ 08836	Airborne Freight Corp.	10/5/99 12/29/99	\$ 500 \$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Driver	Aggregate Year-to-Date > \$ 1,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marion Golkin 2814 Avenue R Brooklyn NY 11229	Royal Funding	10/12/99	\$1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Comptroller	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marion Golkin 2814 Avenue R Brooklyn NY 11229	Royal Funding	10/12/99	\$1,000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Comptroller	Aggregate Year-to-Date > \$ 2,000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Goodstein 242 East 51st Street NY NY 10022	Goodstein Mgmt.	10/5/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate Manager	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernard Schrum 96 Weston Road Somerset, N.J. 08873	Self employed	10/5/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Plumber	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional)

\$4,350

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons other than Political Committees

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

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

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Laura Rivera 6 Bailiwick Drive Warren, NJ 07059	Homemaker	10/12/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 250	
Maryse Bloom 100 Smoke Rise Drive Warren, NJ 07059	Homemaker	10/12/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 250	
C. Full Name, Mailing Address and ZIP Code Mitchell Schrage 65 East 55th Street New York NY 10022	Self employed	10/12/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250	
D. Full Name, Mailing Address and ZIP Code Anthony Mortaruolo 11 Spring Lane Warren NJ 07059	Retired	10/12/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code Frank Costanzo P.O. Box 4221 Warren NJ 07059	Self employed	10/14/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Salesman	Aggregate Year-to-Date > \$ 250	
F. Full Name, Mailing Address and ZIP Code Ludwig Howard Adams 217 Centerbury Road Westfield NJ 07090	Cahill Gordon & Reindel	10/14/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code Thomas Schultz B Indian Rock Road Warren NJ 07059	Advanced Forklifts, Inc.	10/14/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Equipment Salesman	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional) \$2,500

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons other than Political Committees

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

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

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Isaac W. Zisselman 275 Madison Avenue New York, NY 10016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self employed Occupation: Attorney Aggregate Year-to-Date > \$ 250	10/14/99	\$ 250
B. Full Name, Mailing Address and ZIP Code George R. Roberts 2800 Sand Hill Road Menlo Park, CA 94025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Kohlberg Kravis Roberts & Co. Occupation: Merchant Banker Aggregate Year-to-Date > \$ 1,000	10/14/99	\$1,000
C. Full Name, Mailing Address and ZIP Code Joseph Apuzzo 3020 Westchester Avenue Purchase, NY 10577 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Armenia Coffee Occupation: Corporate Officer Aggregate Year-to-Date > \$ 250	10/14/99	\$250
D. Full Name, Mailing Address and ZIP Code Peter Hendricks 73 Paterson Street New Brunswick, NJ 08901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Hendricks & Hendricks Occupation: Attorney Aggregate Year-to-Date > \$ 500	10/14/99	\$500
E. Full Name, Mailing Address and ZIP Code Angelo DeMarco 6 Owens Drive Warren NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: self employed Occupation: medical doctor Aggregate Year-to-Date > \$ 500	10/19/99	\$ 500
F. Full Name, Mailing Address and ZIP Code John DeGaetano 200 Topland Road Mahopac, NY 10541 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Bronx District Attorney's Office Occupation: Attorney Aggregate Year-to-Date > \$ 250	10/19/99	\$ 250
G. Full Name, Mailing Address and ZIP Code Margaret Mazzella 1242 Myrtle Avenue San Diego, CA 92103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Homemaker Occupation: Homemaker Aggregate Year-to-Date > \$ 250	10/26/99	\$250

\$3,000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons other than
Political Committees

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

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

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

NAME OF COMMITTEE (in Full)
GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Wiener One Patriot Centre Englewood NJ 07631	Twenty First Century, LPI	10/26/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Comptroller		Aggregate Year-to-Date > \$ 250
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Stuart 519 North Maple Avenue Greenwich, CT 06830	Kohlberg Kravis Roberts	10/26/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker		Aggregate Year-to-Date > \$ 1,000
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lisa Stuart 519 North Maple Avenue Greenwich CT 06830	Homemaker	10/26/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		Aggregate Year-to-Date > \$ 1,000
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Laurino 75 S. Central Avenue Valley Stream NY 11580	Laurino Enterprises	10/26/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurant Operator		Aggregate Year-to-Date > \$ 500
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maurice Stack, II 90 Hudson Street Hoboken NJ 07030	Stack, Coolahan & Stack	10/26/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Appraiser		Aggregate Year-to-Date > \$ 500
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William J. Janetschek, Jr. 9 West 57th Street New York, NY 10019	Kohlberg Kravis & Roberts	10/27/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker		Aggregate Year-to-Date > \$ 1,000
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta Chan 5 Blue Jay Court Warren NJ 07059	Broadway Downtown Pharmacy	10/29/99	\$ 200
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pharmacist		Aggregate Year-to-Date > \$ 700

SUBTOTAL of Receipts This Page (optional) \$4,450

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons other than Political Committees

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

PAGE 7 OF 8

FOR LINE NUMBER 11 (a) (i)

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Swanicke 14 Red Hill Road Warren NJ 07059	Self employed Occupation: Attorney	10/29/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anthony Pranzatelli 1356 Crim Road Bridgewater, NJ 08836	Pranzatelli's Stereo & TV Occupation: Retail Sales	10/29/99	\$ 500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Martin J. McGowan, III 24 Herning Avenue Cranford, NJ 07016	Self employed Occupation: Sales	11/16/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James R. Fisher 10 Pheasant Run Clarksburg, NJ 08510	Fisher Capital Corp., LLC. Occupation: Corporate Officer	11/18/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dewey Golkin 43 80th Street Brooklyn NY 11209	Self employed Occupation: Attorney	12/1/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Diane Golkin 43 80th Street Brooklyn NY 11209	Homemaker Occupation: Homemaker	12/1/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael W. Michelson 2800 Sand Hill Road Menlo Park, CA 94025	Kohlberg Kravis Roberts & Co. Occupation: Merchant Banker	12/1/99	\$ 1,000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		

SUBTOTAL of Receipts This Page (optional)

\$5,250

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons other than
Political Committees

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

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

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

NAME OF COMMITTEE (In Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Korngold 6 East 45th Street New York NY 10017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Tuchman Katz et.al. Occupation: Attorney	12/23/99	\$ 250
Aggregate Year-to-Date > \$ 250			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Theresa Ray 2 Cedar Ridge Lane Warren NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Homemaker Occupation: Homemaker	12/29/99	\$ 1,000
Aggregate Year-to-Date > \$ 1,000			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Christine Prigge 7500 4th Avenue Brooklyn NY 11209 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Jeffrey Golkin, Attorney at Law Occupation: Legal Assistant	12/31/99	\$ 1,000
Aggregate Year-to-Date > \$ 1,000			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

\$2,250-

TOTAL This Period (last page this line number only)

\$30,450-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **11(b)**

Contributions from Party Committees

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Warren Township Democratic Committee 20 Angus Lane Warren NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$ 250	10/14/99	\$ 250
Franklin Township Election Committee 2205 Anwell Road Somerset, NJ 08873 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$ 250	10/29/99	\$ 250
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	Amount of Each Receipt This Period
_____ Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	_____ Occupation Aggregate Year-to-Date > \$	_____	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional) \$500-

TOTAL This Period (last page this line number only) \$500-

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from other Political Committees

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

PAGE 1 OF 1

FOR LINE NUMBER
11(c)

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRIENDS OF STEVE COHN 16 COURT STREET BROOKLYN NY 11241		9/18/99	\$ 250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$250-

SCHEDULE A

ITEMIZED RECEIPTS

LOANS MADE OR GUARANTEED BY THE CANDIDATE

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

PAGE 1 OF 1
FOR LINE NUMBER 13(a)

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEFFREY GOLKIN 20 ANGUSLANE WARREN NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	SELF EMPLOYED Occupation Attorney Aggregate Year-to-Date > \$ 100,000-	12/16/99	\$100,000 (personal funds)
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$100,000-
TOTAL This Period (last page this line number only)	\$100,000-

SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Somerset Hills Hotel 200 Liberty Corner Rd Warren NJ 07059	Room Rental Deposit Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/2/99	\$200-
B. Full Name, Mailing Address and ZIP Code US Postal Service 201 Watchung Avenue Plainfield NJ 07060	Purpose of Disbursement Postage Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/15/99	Amount of Each Disbursement This Period \$200-
C. Full Name, Mailing Address and ZIP Code Interlude Strings 39 Westview Road Short Hills, NJ 07078	Purpose of Disbursement Music for reception Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/19/99	Amount of Each Disbursement This Period \$225
D. Full Name, Mailing Address and ZIP Code Somerset County 4H Assoc. 310 Milltown Road Bridgewater NJ 08807	Purpose of Disbursement Fair Participant Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/23/99	Amount of Each Disbursement This Period \$370-
E. Full Name, Mailing Address and ZIP Code Jeff Golkin 20 Angus Lane Warren NJ 07059	Purpose of Disbursement Reimbursement of Postage Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/2/99	Amount of Each Disbursement This Period \$230
F. Full Name, Mailing Address and ZIP Code Joy Products 25 West 45th Street New York NY 10036	Purpose of Disbursement Campaign Materials Buttons Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/3/99	Amount of Each Disbursement This Period \$335.58-
G. Full Name, Mailing Address and ZIP Code Dunn's Printing 28 Main Street South Bound Brook, NJ 08880	Purpose of Disbursement Campaign Materials Brochures Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/25/99	Amount of Each Disbursement This Period \$1,620.-
H. Full Name, Mailing Address and ZIP Code Franklin Sign & Stamp 543 Somerset Street Somerset, NJ 08873	Purpose of Disbursement Campaign signs Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/27/99	Amount of Each Disbursement This Period \$245.73
I. Full Name, Mailing Address and ZIP Code Harry Weber 543 Somerset Street Somerset NJ 08873	Purpose of Disbursement Campaign Signs Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/25/99	Amount of Each Disbursement This Period \$412.70-

SUBTOTAL of Disbursements This Page (optional) \$3,839.01

TOTAL This Period (last page this line number only)

SCHEDULE B ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

NAME OF COMMITTEE (In Full)
GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joseph Savoly 12 Whippany Avenue Warren NJ 07059	Photography Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/99	\$162.24
B. Full Name, Mailing Address and ZIP Code Marina Kennedy 20 Hillcrest Avenue Watchung NJ 07050	Purpose of Disbursement: Balloons Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/27/99	Amount of Each Disbursement This Period \$72.00
C. Full Name, Mailing Address and ZIP Code Joy Products 25 West 45th Street New York NY 10036	Purpose of Disbursement Campaign materials Stickers Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/7/99	Amount of Each Disbursement This Period \$259.80-
D. Full Name, Mailing Address and ZIP Code Somerset Hills Hotel 200 Liberty Corner Road Warren NJ 07059	Purpose of Disbursement Room Rental Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/27/99	Amount of Each Disbursement This Period \$2,553.16
E. Full Name, Mailing Address and ZIP Code Bound Brook Investors, Inc. 12 Hamilton Street Bound Brook, NJ 08805	Purpose of Disbursement Security/Office Rent Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/20/99	Amount of Each Disbursement This Period \$1,200-
F. Full Name, Mailing Address and ZIP Code Bell Atlantic 514 Kinderkamack Road Oradell, NJ 07649	Purpose of Disbursement Phone installation Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/22/99	Amount of Each Disbursement This Period \$1,545-
G. Full Name, Mailing Address and ZIP Code Dunn's Printing 28 Main Street South Bound Brook, NJ 08880	Purpose of Disbursement Campaign Materials Invitations Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/24/99	Amount of Each Disbursement This Period \$397.50-
H. Full Name, Mailing Address and ZIP Code Labels&Lists 2500 116th Avenue N.E. Bellevue, WA 98004	Purpose of Disbursement Voter registration lists Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/99	Amount of Each Disbursement This Period \$704.81-
I. Full Name, Mailing Address and ZIP Code Genie Instant Printing 37 West 43rd Street New York, NY 10036	Purpose of Disbursement Campaign Materials Business Cards Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/15/99	Amount of Each Disbursement This Period \$411.35-

SUBTOTAL of Disbursements This Page (optional)	\$7,305.86
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
FOR LINE NUMBER 17

OPERATING EXPENDITURES

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

NAME OF COMMITTEE (in Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Franklin Stamp & Sign 543 Somerset Street Somerset NJ 08873	Sign Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/99	\$341.50-
D'Agostino Catering 421 Main Street Bound Brook NJ 08905	Catering Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/99	\$350-
PSE&G P.O. Box 14444 New Brunswick NJ 08906	Electric Bill Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/99	\$36.85
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$728.35

TOTAL This Period (last page this line number only)

\$11,873.22

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21

OTHER DISBURSEMENTS

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

NAME OF COMMITTEE (In Full)

GOLKIN FOR CONGRESS 2000

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alper for Assembly 936 Stuyvesant Avenue Union, NJ 07083	Non-federal contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/99	\$250-
B. Full Name, Mailing Address and ZIP Code Election fund of Phyllis Mirabella 400 Woodland Avenue Roselle Park NJ 07204	Non-federal contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/99	\$70-
C. Full Name, Mailing Address and ZIP Code Plainfield City Dem. Comm. 7-9 Watchung Ave., Suite 204 Plainfield NJ 07060	Non-federal Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/99	\$250-
D. Full Name, Mailing Address and ZIP Code South Plainfield Dem. Org. 128 Smith Street South Plainfield, NJ 07080	Non-federal contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/28/99	\$450-
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$1,020-

LOANS

Name of Committee (In Full) GOLKIN FOR CONGRESS 2000			
A. Full Name, Mailing Address and ZIP Code of Loan Source JEFFREY GOLKIN 20 ANGUS LANE WARREN NJ 07059	Original Amount of Loan \$100,000-	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period \$100,000-
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ Terms: Date Incurred <u>12/16/99</u> Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____	(This area is shaded to indicate that the information is not to be reported.)		
2. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____			
3. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____			
B. Full Name, Mailing Address and ZIP Code of Loan Source Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____	(This area is shaded to indicate that the information is not to be reported.)		
2. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____			
3. Full Name, Mailing Address and ZIP Code Name of Employer Occupation Amount Guaranteed Outstanding: \$ _____			

SUBTOTALS This Period This Page (optional) _____

TOTALS This Period (last page in this line only) _____ **\$100,000-**

Information on the relationship between this page and LINE 1, Schedule C, for this line, if on Schedule C, carry forward to appropriate line of Summary.

