REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
Sue Kelly For Congress

ADDRESS (number and street) ☒ Check if different than previously reported.
c/o Sanossian
660 White Plains Road # 410

CITY, STATE and ZIP CODE | STATE/DISTRICT
Tarrytown NY 10591-5104 | NY-19

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
AUG 3 10 00 AM '99

2. FEC IDENTIFICATION NUMBER
C00294900

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☒ July 31 Mid-Year Report (Non-election Year Only)

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____.
☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____.
☐ Termination Report

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 January 1 through June 30 1999		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	231,829	231,829
	(b) Total Contribution Refunds (from Line 20(d))	—	—
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	231,829	231,829
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	78,742	78,742
	(b) Total Offsets to Operating Expenditures (from Line 14)	—	—
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	78,742	78,742
8.	Cash on Hand at Close of Reporting Period (from Line 27)	498,261	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	—	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	111,544	

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
GEORGE C. SANOSSIAN

Signature of Treasurer

Date
July 31 1999

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 4/97)

FE8AN079

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

C00294900

Name of Committee (in full): SUE KELLY FOR CONGRESS

Report Covering the Period: From: JAN 1 To:

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)	106,300		11(a)(i)
(ii) Unitemized	31,479		11(a)(ii)
(iii) Total of contributions from individuals	137,779	137,779	11(a)(iii)
(b) Political Party Committees	1,000	1,000	11(b)
(c) Other Political Committees (such as PACs)	93,050	93,050	11(c)
(d) The Candidate	—	—	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	$231,829	$231,829	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	—	—	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate	—	—	13(a)
(b) All Other Loans	—	—	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	—	—	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	—	—	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	$1,505	$1,505	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	$37,334	$37,334	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	78,742	78,742	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	—	—	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	—	—	19(a)
(b) Of All Other Loans	—	—	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	—	—	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	—	—	20(a)
(b) Political Party Committees	—	—	20(b)
(c) Other Political Committees (such as PACs)	—	—	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	—	—	20(d)
21. OTHER DISBURSEMENTS	—	—	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	78,742	78,742	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 339,669	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 37,334	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 377,003	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 78,742	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 298,261	27

FE6AN079

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 7

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS

C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Durst, Douglas 1155 Avenue of the Americas New York, NY 10036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Durst Real Estate Owner Aggregate Year-to-Date > $1000	1/29/99	$1000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Pacchiana, Gregg 1403 East Franklin Street Chapel Hill, NC 27514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Triple Construction Aggregate Year-to-Date > $1000	1/29/99	$1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sidamon-Eristoff, Anne 120 East End Avenue New York, NY 10111 Receipt For: [X] Primary [ ] General [ ] Other (specify):	 Homemaker Aggregate Year-to-Date > $1000	1/29/99	$1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sidamon-Eristoff, Anne 120 East End Avenue New York, NY 10111 Receipt For: [ ] Primary [X] General [ ] Other (specify):	 Homemaker Aggregate Year-to-Date > $1000	1/29/99	$1000
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Conroy, Eugene 154 Mead Street Pocantico, NY 10597 Receipt For: [X] Primary [ ] General [ ] Other (specify):	CHMC Real Estate Mgt. Aggregate Year-to-Date > $1000	1/29/99	$1000
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Beitzel, George 114 Marcourt Drive Chappaqua, NY 10514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	self-employed self Aggregate Year-to-Date > $1000	1/29/99	$1000
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Holbrook, David Two Beekman Place New York, NY 10022 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Marsh + McLennan Insurance Consultant Aggregate Year-to-Date > $1000	1/29/99	$1000

SUBTOTAL of Receipts This Page (optional)	$7000
TOTAL This Period (last page this line number only)	

4-00145

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 2 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Olson, William 82 Argyle Place Briarcliff Manor, NY 10510 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 1000	1/29/99	$ 1000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dunn, Edward 6 Pizzle Island Road Rye, New York 10580 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 1000	1/29/99	$ 1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Pollack, Leslie 8 Long Meadow Road Bedford, NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: NEUBERGER & BERMAN Occupation: INVESTMENT MANAGER Aggregate Year-to-Date > $ 1000	1/29/99	$ 1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Pollack, Yvonne 8 Long Meadow Road Bedford, NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > $ 1000	1/29/99	$ 1000
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Murphy, Charles E., Jr. 27 Taylor Rd. Mt. Kisco, NY 10549 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 1000	1/27/99	$ 1000
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Barlow, Witt Box 753 Rogers, New York 10521 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1000	1/27/99	$ 1000
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Degrea, Don 24 Limerick Place Greenwich, CT 06807 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: ENG. BARING, FURMAN, FENZ Occupation: MANAGING DIRECTOR Aggregate Year-to-Date > $ 1000	1/27/99	$ 1000

SUBTOTAL of Receipts This Page (optional) ..... $ 7000

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

4-001A5

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS

C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Degrea, Dan 324 Limerick Place Greenwich, CT 06807 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer: ING Baring, Furman, Selz LLP. Occupation: MANAGING DIRECTOR Aggregate Year-to-Date: $ 2000	1/27/99	$1000
B. Full Name, Mailing Address and ZIP Code Petrocelli, Lucio 7D2, Box 53A, Moog Road Garrison, New York 10524 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date: $ 1000	1/27/99	$1000
C. Full Name, Mailing Address and ZIP Code Simpson, William 129 Katonah's Wood Road Katonah, NY 10536 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Yale University Occupation: PROFESSOR Aggregate Year-to-Date: $ 1000	1/27/99	$1000
D. Full Name, Mailing Address and ZIP Code Trump, Donald 725 5th Avenue New York, NY 10022 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer: Self-Employed Occupation: Self Employed Aggregate Year-to-Date: $ 1000	2/23/99	$1000
E. Full Name, Mailing Address and ZIP Code Ciccone, Bennett 1 Monroe Drive Poughkeepsie, NY 12601 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer: self-employed Occupation: SELF EMPLOYED Aggregate Year-to-Date: $ 1000	2/23/99	$1000
F. Full Name, Mailing Address and ZIP Code Hollis, F. Daniel 176B Heritage Hills Somers, NY 10589 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Sranberg, Maxwell Occupation: Attorney Aggregate Year-to-Date: $ 250	2/23/99	$250
G. Full Name, Mailing Address and ZIP Code Eggleston, William PO Box 72 Bedford, NY 10506 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Occupation: Retired Aggregate Year-to-Date: $ 1000	2/22/99	$1000

SUBTOTAL of Receipts This Page (optional) $250

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

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 4 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Eggleston, Patricia PO Box 72 Bedford, New York 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date: $ 1000	2/22/99	$1000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Rights, Michael 20 Windswept Circle Brewster, NY 10509 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Lawyer Aggregate Year-to-Date: $ 1000	2/22/99	$1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sun, Robert 3 Neptune Road Poughkeepsie, NY 12601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sun International Group Occupation: PRESIDENT Aggregate Year-to-Date: $ 1000	2/22/99	$1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jones-Bramin, Elaine 11 Windabout Drive Greenwich, CT 06831 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 500	2/22/99	$500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Crank, James 145 7th Street Verplanck, NY 10596 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Hudson River Boat Occupation: President Aggregate Year-to-Date: $ 300	2/22/99	$300
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Kaplan, Alan 22 Hilltop Road Wappingers, NY 10597 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Plaza Video Occupation: owner Aggregate Year-to-Date: $ 500	2/22/99	$500
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Daniels, Charles 23 Bridle Lane Fishkill, New York 12524 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Daniels Agency Occupation: Insurance Sales Aggregate Year-to-Date: $ 250	2/4/99	$250

SUBTOTAL of Receipts This Page (optional) $4,550

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

4-00148

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dougherty, Patrick 101 N. Moger Ave, Apt. E Mt. Kisco, NY 10549 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Village of Mt. Kisco Treasurer Aggregate Year-to-Date > $ 250.00	2/4/99	$ 250
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Quinn, David 138 Keeler Lane North Salem, NY 10560 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-employed SELF-EMPLOYED Aggregate Year-to-Date > $ 1000	2/4/99	$1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Reese, Frances Stevens P.O. Box 220 Hughsonville, NY 12537 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Homemaker Aggregate Year-to-Date > $1000	2/4/99	$1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Redl, Herbert 80 Washington St., Ste 100 Poughkeepsie, NY 12601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-employed SELF-EMPLOYED Aggregate Year-to-Date > $ 1000	2/4/99	$1000
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Pryor, Samuel 10 Bread Brook Bedford Hills, NY 10607 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Davis, Polk, + Wardwell Attorney Aggregate Year-to-Date > $ 1000	2/4/99	$1000
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Boesky, Seema 340 Series Street Mt. Kisco, NY 10649 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Homemaker Aggregate Year-to-Date > $ 1000	2/4/99	$1000
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Petrillo, Ted PO Box 3426 Poughkeepsie, NY 12603 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Westage Corporation President Aggregate Year-to-Date > $ 1000	2/4/99	$1000

SUBTOTAL of Receipts This Page (optional) $6250

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

4-00145

SCHEDULE A — ITEMIZED RECEIPTS

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PAGE 6 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Laun, Louis F. 25 Spring Lane Chappaqua, NY 10514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 1000	2/4/99	$1000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Laun, Margaret M. 25 Spring Lane Chappaqua, NY 10514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: HOMEMAKER Aggregate Year-to-Date > $ 1000	2/4/99	$1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Fasciana, Joan A. 117 Succabone Road Bedford Hills, NY 10507 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Fasciana and associates Occupation: C.P.A. Aggregate Year-to-Date > $ 1000	2/4/99	$1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Katzenback, L. Emery Box 250, 118 Mead Street Waccabuc, NY 10597 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 1,000	2/4/99	$1000
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Marseilles, Marley 118 Mead Street, Box 250 Waccabuc, NY 10597 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Self-employed Occupation: Interior Designer Aggregate Year-to-Date > $ 1,000	2/4/99	$1000
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
HOWARD KELLY 102 CCENEIDA AVE CARMEL NY 10512 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: PUTNAM ENGINEERING Occupation: ENGINEER Aggregate Year-to-Date > $ 250	3/16/99	$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
BRYAN COLLEY FRONT STREET CROTON FALLS NY Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: COLLEY MCOY INC. Occupation: EXECUTIVE Aggregate Year-to-Date > $ 1,000	3/16/99	$1,000.00

SUBTOTAL of Receipts This Page (optional)	6250
TOTAL This Period (last page this line number only)	

FEC-00135

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRUCE DAVID COLLEY 10 FRONT STREET CROTON FALLS NY 10519	COLLEY MCOY INC.	3/16/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: EXECUTIVE 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
DEAN W. COLLEY 43 LINDEN LANE BEDFORD CORNERS MT KISCO NY 10549	COLLEY MCOY INC.	3/16/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: EXECUTIVE 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
CORNELIUS EUGENE COLLEY 31 BROOKVILLE ROAD BROOKVILLE, NY 11545	Colley McCoy, Inc	3/16/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Executive 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
EUGENE O COLLEY WINDSWEPT FARM RT 116 NORTH SALEM NY 10560		3/16/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED 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
EUGENE O COLLEY WINDSWEPT FARM RT 116 NORTH SALEM NY 10560		3/16/99	$1,000
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: RETIRED 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
LAURA J. STURZ 6 AUTUMN RIDGE ROAD POUND RIDGE NY 10576	LINDENS COOKIES	3/10/99	$200
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: EXECUTIVE Aggregate Year-to-Date > $ 200		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALFRED A. DELLIBOVI Box 961 CHAPPAQUA N.Y. 10514-0761	FEDERAL HOME LOAN BANK OF N.Y.	3/10/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: BANKER Aggregate Year-to-Date > $ 1,000		

SUBTOTAL of Receipts This Page (optional)	6,200
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITE...IZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GEORGE M. HOMER, JR. 4 KENMARE ROAD LARCHMONT N.Y. 10538	Occupation	3/10/99	$200
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 200		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EDMUND J. BERGASSI 7 COLUMBUS CIRCLE EASTCHESTER, NY 10709	THE BERGASSI AGENCY Occupation SELF-EMPLOYED	3/10/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
EDMUND J. BERGASSI 7 COLUMBUS CIRCLE EASTCHESTER, NY 10709	THE BERGASSI AGENCY Occupation SELF-EMPLOYED	3/10/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
JOHN FRANCIS FITZPATRICK 14060 ROAD CONE MT. KISCO, NY 10549-4524	Occupation	3/10/99	$500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
VINCENT TAMAGNA 225 DEPOT SQUARE GARRISON NY 10524	PUTNAM COUNTY BOARD OF LEGISLATORS Occupation COUNTY LEGISLATOR	3/10/99	$250.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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 NUTTO 7 PLATAIRIE ROAD CORNWALL ON HUDSON, NY 12520	Occupation RETIRED	3/10/99	$250
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD POE 3 CARPENTER WAY ARMONK, NY 10504	LEGG, MASON, HARMAN & WILSON Occupation MORTGAGE BANKER	3/10/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		

SUBTOTAL of Receipts This Page (optional) 3,200

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. PARKER C. MONTGOMERY 812 PARK AVENUE NY NY 10021 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF-EMPLOYED / SELF / $ 1,000	3/10/99	$1,000
B. WILLIAM METZLER 1435 BAY BLVD. ATLANTIC BEACH ESTATES, NY 11509 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF-EMPLOYED / SELF / $ 250	3/10/99	$250.
C. GRANT CALLY 345 HARBOR DRIVE OYSTER BAY NEWYORK 11771 Receipt For: [X] Primary [ ] General [ ] Other (specify):	CALLY AND CALLY / ATTORNEY / $ 250	3/10/99	$250
D. THOMAS J. ADAMEK 6113 CHANDLER DRIVE BATON ROUGE LA 70808 Receipt For: [X] Primary [ ] General [ ] Other (specify):	BANK ONE CAPITAL MARKETS INC. / PRESIDENT / $ 200	4/5/99	$200.00
E. PHYLLIS CRANAT 153 DARTERS LANE NORTH HILLS NY 11030 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Homemaker / $ 250	4/5/99	$250
F. LEE MERCER 2508 N DINWIDDIE STREET ARLINGTON, VA 22207 Receipt For: [X] Primary [ ] General [ ] Other (specify):	NATIONAL ASSOCIATION SMALL BUSINESS INVESTMENT COMPANIES / PRESIDENT / $ 250	4/5/99	$250
G. ROBERT T DOTCHIN 412 NORTH ST ASAPH ST ALEXANDRIA VA 22314-2318 Receipt For: [X] Primary [ ] General [ ] Other (specify):	THE ADVOCACY GROUP / LOBBYIST / $ 500	4/5/99	$500

SUBTOTAL of Receipts This Page (optional) 2,700

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

FEC Form 3 (6/96)

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code MANUEL E IGLESIAS 12300 OLD CUTLER ROAD MIAMI, FL 33156 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: CAPITAL INTERNATIONAL SBIC, LP Occupation: PRESIDENT Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000.00
B. Full Name, Mailing Address and ZIP Code MARY BETH ETWICK 1021 S. BARTON ST UNIT 107 ARLINGTON, VA 22204 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: REINSURANCE ASSOCIATION OF AMERICA Occupation: DIRECTOR FEDERAL AFFAIRS Aggregate Year-to-Date > $ 250	4/5/99	$250.00
C. Full Name, Mailing Address and ZIP Code FRANKLIN NUTTER 8458 PORTLAND PLACE MCLEAN, VA 22102 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: REINSURANCE ASSOCIATION OF AMERICA Occupation: PRESIDENT Aggregate Year-to-Date > $ 250	4/5/99	$250.00
D. Full Name, Mailing Address and ZIP Code CHARLES BRIGANT 201 CEDAR LANE OSSINING NY 10562 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 250	4/5/99	$250
E. Full Name, Mailing Address and ZIP Code WARREN B. HOLBY 25 MAHEGAN ROAD, LARCHMONT, NY 10538 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 500	4/5/99	$500
F. Full Name, Mailing Address and ZIP Code DR. STEPHEN AMEROY 16 FAIRVIEW AVE POUGHKEEPSIE NY 12601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Schatz Bearing Corp Occupation: PRESIDENT Aggregate Year-to-Date > $ 250	4/5/99	$250.
G. Full Name, Mailing Address and ZIP Code JEREMIAH BOGERT 55 DAVIDS HILL ROAD BEDFORD HILLS NY 10501 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: JAMES C EDWARDS AND COMPANY Occupation: INVESTMENT COMISSION Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000

SUBTOTAL of Receipts This Page (optional) ..... > 3,500

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS

C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RON NAPOLI 21 LAUDER LANE GREENWICH CT 06831-3707 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TOYOTA NORTH Occupation: PRESIDENT Aggregate Year-to-Date > $ 1000	4/5/99	$1,000
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATRICIA NAPOLI 21 LAUDER LANE GREENWICH CT 06831-3707 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: HOMEMAKER Aggregate Year-to-Date > $ 1000	4/5/99	$1,000
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN S. VOGESTAD PO BOX 387 Bouley Road South Salem NY 10590 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Geyisir Corp Occupation: Resident Aggregate Year-to-Date > $ 250	4/5/99	$250
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JANE QUINN 152 KEELER LANE NORTH SALEM NY 10560 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed Occupation: Freelance Writer Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELEANOR PADOVANI ORCHARD HILL ROAD KATONAH NY 10536 Receipt For: [X] Primary [ ] General [ ] Other (specify):	YORKTOWN MEDICAL/RADIOLOGY Occupation: LAB TECHNICIAN Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SALLY PILLSBURY 300 BRACKETTS POINT RD. WAYZATA, MN 55391 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF EMPLOYED Occupation: PROFESSIONAL VOLUNTEER Aggregate Year-to-Date > $ 250	4/5/99	$250
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANNETTE D. NAMAN 507 BOLTON PLACE HOUSTON, TEXAS 77024 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF EMPLOYED Occupation: SELF Aggregate Year-to-Date > $ 500	4/5/99	$500.00

SUBTOTAL of Receipts This Page (optional)	5,000
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITE...IZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
MARJORIE L. HART 133 EAST 64TH ST. NEW YORK, N.Y. 10021-7045 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 250	4/5/99	$250.
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
HARLAN CROW 2001 ROSS AVE., STE 3200 DALLAS, TEXAS 75201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: CROW HOLDINGS Occupation: INVESTMENTS Aggregate Year-to-Date > $ 500	4/5/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
WORTHINGTON MAYO-SMITH CROTON GATE ROAD MT. KISCO NY 10549 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: LONG ALLS & SNYDER Occupation: INVESTMENT ADVISOR Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
CHARLENE MITCHELL 34 FRANCES DRIVE RD 4 KATONAH NY 10536 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 200	4/5/99	$200.
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ELEANOR ELLIOTT 1025 FIFTH AVENUE NEW YORK, NY 10028 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: SELF EMPLOYED Occupation: SELF EMPLOYED Aggregate Year-to-Date > $ 750	4/5/99	$250
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
PETER CLARK WOLLE 15 MIDDLE PATENT ROAD BEDFORD, NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: AB WOLLE & COMPANY INC. Occupation: PRESIDENT Aggregate Year-to-Date > $ 200	4/5/99	$200
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
MELVIN WILLIAM 44 LUDLOW DRIVE CHAPPAQUA, NY 10514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 200	4/5/99	$200

SUBTOTAL of Receipts This Page (optional) 2,600

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
STANLEY GRUBER 38 DEVONSHIRE DRIVE WHITE PLAINS NY 10605-5444 Receipt For: [X] Primary [ ] General [ ] Other (specify)	MICRUS CEO Aggregate Year-to-Date > $ 200	4/5/99	$200
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM SANDBROOK 2 COVAN COURT WASHINGTONVILLE NY 10992 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TILCON NEW YORK PRESIDENT CEO Aggregate Year-to-Date > $ 1,000	4/5/99	$1000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
DORTA CAMERON 115E PUTNAM AVE. GREENWICH, CT 06830-5643 Receipt For: [X] Primary [ ] General [ ] Other (specify):	ENTEX CHAIRMAN Aggregate Year-to-Date > $ 200	4/5/99	$200
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS FORSYTH 13 FOX RUN ROAD WILTON, CT 06897 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SWISS RE AMERICA ATTORNEY Aggregate Year-to-Date > $ 200	4/5/99	$200
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
BARNABAS MCHENRY 164 E 72nd ST NEW YORK, NY 10021 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF EMPLOYED ATTORNEY Aggregate Year-to-Date > $ 200	4/5/99	$200
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ALTHEA QUERSTEN 20 SUTTON PLACE SOUTH APT 17D NEW YORK, NY 10022 Receipt For: [X] Primary [ ] General [ ] Other (specify):	CHASE MANHATTAN BANK MONEY MANAGER Aggregate Year-to-Date > $ 300	4/5/99	$300
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ROSS JONES 14434 OAK PLACE SARATOGA, CA 95707 Receipt For: [X] Primary [ ] General [ ] Other (specify):	KNIGHT RIDDER CHIEF FINANCIAL OFFICER Aggregate Year-to-Date > $ 200	4/12/99	$200

SUBTOTAL of Receipts This Page (optional)	2,300
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
DONALD LOMB RR#1 Box 311 AMENIA, NY 12501 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 400	4/12/99	$400
B. Full Name, Mailing Address and ZIP Code THOMAS HUNTINGTON 1025 WESTCHESTER AVENUE WHITE PLAINS NY 10604 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: PINNACLE PLAN CONSULTANTS Occupation: INSURANCE SALES Aggregate Year-to-Date > $ 1,000	4/12/99	$1,000
C. Full Name, Mailing Address and ZIP Code JAYME STEWART SAYSAIL FARM 396 GRANT ST NORTH SALEM NY 10560 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: YORK PREP. SCHOOL Occupation: OWNER Aggregate Year-to-Date > $ 1,000	4/12/99	$1,000
D. Full Name, Mailing Address and ZIP Code JOHN WARDEN 125 BROAD ST NEW YORK NY 10004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: SULLIVAN & CROMWELL Occupation: ATTORNEY Aggregate Year-to-Date > $ 1,000	4/12/99	$1,000
E. Full Name, Mailing Address and ZIP Code THOMAS J. KAVALER 90 PINE STREET NEW YORK, NY 10005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: CAHILL, GORDON & REINDEL Occupation: ATTORNEY Aggregate Year-to-Date > $ 1,000	4/12/99	$1,000
F. Full Name, Mailing Address and ZIP Code SUZANE SADOFSKY 6 RICK LANE COURTLANDT MANOR, NY 10564 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: TODDVILLE REAL ESTATE Occupation: REALTOR Aggregate Year-to-Date > $ 250	4/12/99	$100
G. Full Name, Mailing Address and ZIP Code APRIL FOLEY 45 SMITH RIDGE ROAD SOUTH SALEM NY 10590 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: HOUSEWIFE Aggregate Year-to-Date > $ 400	4/12/99	$250

SUBTOTAL of Receipts This Page (optional) 4750

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

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

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Jerry Speyer 520 Madison Avenue New York NY 10022 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Tishman Speyer Properties Occupation: Executive Aggregate Year-to-Date: $ 1,000	4/16/99	$1,000
B. Full Name, Mailing Address and ZIP Code Mary Wacton Curley 3 East 77th St. New York, NY 10021 Receipt For: ☒ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation: Homemaker Aggregate Year-to-Date: $ 2,000	4/27/99	$2,000
C. Full Name, Mailing Address and ZIP Code Patricia Hecker 26 Black Creek Ct. St Louis, MO 63124 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation: Homemaker Aggregate Year-to-Date: $ 500	4/27/99	$500
D. Full Name, Mailing Address and ZIP Code Robert Decciangelo 7 Salem Road Pound Ridge NY 10576 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Physician Aggregate Year-to-Date: $ 200	4/27/99	$200
E. Full Name, Mailing Address and ZIP Code Ismet Bacaj 2402 65th St Apt B-16 Brooklyn NY 11204 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Kings Management Company Occupation: Supervisor Aggregate Year-to-Date: $ 1000	5/12/99	$1,000
F. Full Name, Mailing Address and ZIP Code Luc Krasniqi 33 Spring Glen Drive Mt Kisco NY 10549 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Consultant Aggregate Year-to-Date: $ 500	5/12/99	$500
G. Full Name, Mailing Address and ZIP Code Tahir Gecaj 19 Kent Street Beacon, NY 12508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Vegomble Garden Restaurant Occupation: Owner Aggregate Year-to-Date: $ 500	5/12/99	$500

SUBTOTAL of Receipts This Page (optional): $5700

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

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SCHEDULE A | ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS

C00294900

A. Full Name, Mailing Address and ZIP Code
TAMIR GECAJ
19 KENT STREET
BEACON, NY 12508

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer: VEGETABLE GARDEN RESTAURANT
Occupation: OWNER
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 1,000
Amount of Each Receipt this Period: $500

B. Full Name, Mailing Address and ZIP Code
ILIRIAN RUSI
16 HARNESS LANE
MARLBORO, NJ 07746

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer: SELF EMPLOYED
Occupation: SELF EMPLOYED
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 1,000
Amount of Each Receipt this Period: $1,000

C. Full Name, Mailing Address and ZIP Code
MARY PEYRE MAZZOCCHI
28 HURLINGHAM CLUB ROAD
FAR HILLS NJ 07931

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer:
Occupation: RETIRED
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 500
Amount of Each Receipt this Period: $500

D. Full Name, Mailing Address and ZIP Code
NAKRI HISENA
12 LACKAWANNA AVENUE
GLADSTONE NJ 07634

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer: RUDOLFO RESTAURANT
Occupation: OWNER
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 500
Amount of Each Receipt this Period: $500

E. Full Name, Mailing Address and ZIP Code
EKREM GASHI
344 EAST 85th STREET APT. 6A
NEW YORK NY 10028

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer: GASCI & ASSOCIATES
Occupation: MANAGEMENT CONSULTANT
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 500
Amount of Each Receipt this Period: $500

F. Full Name, Mailing Address and ZIP Code
RAMADAN GASHI
455 E 86th ST. NO 5B
NEW YORK, NY 10028

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer: KRAISEL COMPANY
Occupation: RESTAURANT MANAGER
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 500
Amount of Each Receipt this Period: $500

G. Full Name, Mailing Address and ZIP Code
GJAFER BEQISHA
27 HUDSON VIEW DRIVE
BEACON, NY 12508

Receipt For: [X] Primary [ ] General [ ] Other (specify):

Name of Employer:
Occupation:
Date (month, day, year): 5/12/99
Aggregate Year-to-Date > $ 300
Amount of Each Receipt this Period: $500

SUBTOTAL of Receipts This Page (optional) 4,000

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

FEC 4-00145

SCHEDULE A | ITEMIZED RECEIPTS

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

PAGE 17 OF 17

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): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ELMI BERISHA 448 HUDSON VIEW DRIVE BEACON, NY 12508 Receipt For: [X] Primary [ ] General [ ] Other (specify):	CALABRIA RESTAURANT CHEF Aggregate Year-to-Date $ 500	5/12/99	$500
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
HASAN OSMANI 11 TRAPPING WAY PLEASANTVILLE, NY 10570 Receipt For: [X] Primary [ ] General [ ] Other (specify):	 Aggregate Year-to-Date $ 500	5/12/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
MARJAN CUBI 167 EAST 82 ST APT 1E NEW YORK, NY 10028 Receipt For: [X] Primary [ ] General [ ] Other (specify):	DOWNING MANAGEMENT BUILDING MANAGER Aggregate Year-to-Date $ 500	5/12/99	$500
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
GJOK DECKAJ RD1 Box 661 ARBOR ROAD CAMPBELL HALL NY 10916 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF-EMPLOYED SELF EMPLOYED Aggregate Year-to-Date $ 500	5/12/99	$500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
JOHN BITICI 34 MERCIERLINE BERKLEY HEIGHTS NJ 07922 Receipt For: [X] Primary [ ] General [ ] Other (specify):	CALABRIA RESTAURANT OWNER Aggregate Year-to-Date $ 500	5/12/99	$500
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
HARRY BAGRAKTARI 617 E 188TH STREET BRONX NY 10458 Receipt For: [X] Primary [X] General [ ] Other (specify):	SELF-EMPLOYED SELF-EMPLOYED Aggregate Year-to-Date $ 1,500	5/12/99	$1,500
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
VINCENT MORENO BIRCH HILL ROAD POWLING NY 12564 Receipt For: [X] Primary [ ] General [ ] Other (specify):	THE PRESCRIPTION SHOP OWNER Aggregate Year-to-Date $ 1,000	5/12/99	$1,000

SUBTOTAL of Receipts This Page (optional) 5,000

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code NEDEMA H. HARTLEY 870 UNITED NATIONS PLAZA NEW YORK, NY 10017 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF EMPLOYED / ACTRESS / $ 1,000	5/12/99	$1,000
B. Full Name, Mailing Address and ZIP Code SUSAN BROWN 228 HANSELL ROAD NEWTOWN SQUARE, PA 19073 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker / $ 250	5/12/99	$250
C. Full Name, Mailing Address and ZIP Code WILLIAM REISLER 233 W 47TH ST KANSAS CITY, MO 64112 Receipt For: [X] Primary [ ] General [ ] Other (specify):	KANSAS CITY EQUITY PARTNERS, L.L.C. / PARTNER / $ 250	4/6/99	$250
D. Full Name, Mailing Address and ZIP Code THEODORE BRIGGS RR#1, BOX 78 MILLBROOK, NY 12545 Receipt For: [X] Primary [ ] General [ ] Other (specify):	SELF EMPLOYED / FARMER / $ 200	6/30/99	$100
E. Full Name, Mailing Address and ZIP Code JOHN LEGGS 88 MAPLE AVE KATONAH NY 10536-8721 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed / Attorney / $ 200	6/23/99	$200.
F. Full Name, Mailing Address and ZIP Code WILLIS H STEPHENS PO BOX 301 BREWSTER NY 10509 Receipt For: [X] Primary [ ] General [ ] Other (specify):	RETIRED / $ 1,000	6/23/99	$1,000
G. Full Name, Mailing Address and ZIP Code DUNCAN BARRETT 46 COCKROW RD. TROY NY 12180 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TALOMIC CAPITOL CORP. / REAL ESTATE CONSULTANT / $ 200	6/23/99	$200

SUBTOTAL of Receipts This Page (optional): 3,000

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

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SCHEDULE A | **ITEMIZED RECEIPTS**

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

PAGE 19 OF 47

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUZANNE SIRONI 47 INDIANHEAD RD BEDFORD NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	C.M.S. Occupation: Sales Manager Aggregate Year-to-Date > $ 200	6/23/99	$200
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD A. EDWARDS 5 AMANDA COURT CORTLANDT MANOR NY 10567 Receipt For: [X] Primary [ ] General [ ] Other (specify):	PHILIP MORRIS USA Occupation: ASSISTANT CONTROLLER Aggregate Year-to-Date > $ 250	6/23/99	$250
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RUTH S. STANTON 834 5th AVENUE NY NY 10021 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > $ 250	6/23/99	$250
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUSAN EFRON 10 PRYER CT. LARCHMONT NY 10538 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > $ 200	6/23/99	$200
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VIRGINIA BRIGANT 201 CEDAR LANE OSSINING NY 10562 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 500	6/23/99	$500
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
YOLNE F. RICHTER 125 DAVIAS MILL RD. BEDFORD HILLS NY 10507 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250	6/23/99	$250
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUSAN STUEBNER 23 KUCHLER DRIVE LAGRANGEVILLE NY 12540 Receipt For: [X] Primary [ ] General [ ] Other (specify)	VASSAR COLLEGE Occupation: NURSE Aggregate Year-to-Date > $ 200	6/23/99	$200.

SUBTOTAL of Receipts This Page (optional)	1850
TOTAL This Period (last page this line number only)	

6-00145

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER(S): 11(b)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
FRED STUEBNER 23 LUCIFER DRIVE CARMEL HAMLET NY 12540 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation: RETIRED Aggregate Year-to-Date: $ 200	6/23/99	$200
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
WARREN B. KOLBY 25 MORGAN RD GOLDENS BRIDGE NY 10538-1426 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation: RETIRED Aggregate Year to Date: $ 1,000	6/23/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer: SALOMON SMITH BARNEY Occupation: STOCKBROKER Aggregate Year-to-Date: $ 250	6/23/99	$250
CHARLES TISI UPPERMILL RD KATONAH NY 10536 Receipt For: [X] Primary [ ] General [ ] Other (specify)			
D. Full Name, Mailing Address and ZIP Code	Name of Employer: LIBERTY LINES Occupation: OWNER Aggregate Year-to-Date: $ 250	6/23/99	$250
ARTHUR BERNACCHI 475 SAWMILL RIVER RD YONKERS NY 10703 Receipt For: [X] Primary [ ] General [ ] Other (specify)			
E. Full Name, Mailing Address and ZIP Code	Name of Employer: NY STATE SENATE Occupation: STATE SENATOR Aggregate Year-to-Date: $ 200	6/23/99	$200
WILLIAM J. LARKIN 1093 LITTLE BRITAIN RD NEW WINDSOR NY 12553 Receipt For: [X] Primary [ ] General [ ] Other (specify)			
F. Full Name, Mailing Address and ZIP Code	Name of Employer: Cramer and Kassalt Occupation: Senior Vice-President Aggregate Year-to-Date: $ 200	6/30/99	$200
BARCLAY TIPS 255 BRISTOL ST. NORTHFIELD ILL. 60093 Receipt For: [X] Primary [ ] General [ ] Other (specify)			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation: HOUSEWIFE Aggregate Year-to-Date: $ 1,000	6/30/99	$600
APRIL FOLEY 45 SMITHRIDGE RD SOUTH SALEM NY 10590 Receipt For: [X] Primary [ ] General [ ] Other (specify)			
SUBTOTAL of Receipts This Page (optional)			2200
TOTAL This Period (last page this line number only)			

FEC FORM 3

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ELIZABETH BEINECKE 21 EAST 79th ST. NY NY 10021 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 500	6/30/99	$500
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
JAMES HAMILTON PO BOX 801 NEWBERRY NH 03255 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: HAMILTON + COMPANY Occupation: CEO Aggregate Year-to-Date: $ 500	6/30/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
TATIANA L. LOWE 100 CLINTON RD BEDFORD HILLS NY 10507 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 200	6/30/99	$200
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
HENRY DARLINGTON JR. 1115 FIFTH AVENUE NY NY 10128 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 200	6/30/99	$200
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ROSS JONES 14434 OAK PLACE SARATOGA CALIFORNIA 95070 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: KNIGHT RIDDER Occupation: CFO Aggregate Year-to-Date: $ 400	6/30/99	$200
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
PRISCILLA BUTLER 49 PINE BROOK RD BEDFORD NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 200	6/30/99	$200
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
SALLY W. PILLSBURY 1300 BRACKETTS POINT RD. WAYZATA MN 55391 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: SELF EMPLOYED Occupation: PROFESSIONAL ACCOUNTANT Aggregate Year-to-Date: $ 500	6/30/99	$250

SUBTOTAL of Receipts This Page (optional): 2050

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

FEC FORM 3 (2/94)

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 11 OF 17

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. PETER VAN NESS PHILIP Box 532, Guard Hill Rd. Bedford, NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 250	6/30/99	$250.
B. MARIANNE SCHANZENBACH 17 TACONIC DRIVE HOPEWELL JUNCTION NY 12533 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 250	6/30/99	$250
C. STEVEN POMEROY 16 FAIRVIEW AVE. POUGHKEEPSIE NY 12601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Schatz Bearing Corp. Occupation: EXECUTIVE Aggregate Year-to-Date > $ 500	6/30/99	$250
D. JOSEPH PIMA 741 TITICUS RD. NORTH SALEM NY 10560 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Private Investor Aggregate Year-to-Date > $ 250	6/30/99	$250
E. HAMILTON MESEREAU PO Box 121 MILLBROOK NY 12545 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 250	6/30/99	$250
F. CAROLYN S. BEEBE 100 GREENWICH RD BEDFORD NY 10506 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: George Little Management Co. Occupation: Consultant / Director Aggregate Year-to-Date > $ 400	6/30/99	$300
G. JOAN CALRYMPLE 20 DAVIAS Way BEDFORD HILLS NY 10507 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date > $ 250	6/30/99	$250
SUBTOTAL of Receipts This Page (optional)			1,800
TOTAL This Period (last page this line number only)			

4-08145

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER(S): 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
PHILIP KATZ 24 ETON RD SCARSDALE NY 10583 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Self-Employed Occupation: Investor Aggregate Year-to-Date > $ 500	6/30/99	$500
B. Full Name, Mailing Address and ZIP Code RONALD WEISSMAN 30 WHITLAW CLOSE CHAPPAQUA NY 10504 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation Aggregate Year-to-Date > $ 500	6/30/99	$500
C. Full Name, Mailing Address and ZIP Code GLADYS PRESTON 3025 WHITE HAVEN ST N.W. WASHINGTON DC 20008 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer Occupation: RETIRED Aggregate Year-to-Date > $ 500	6/30/99	$500
D. Full Name, Mailing Address and ZIP Code WARDWICK SIMMONS 77 TODD RD KATONAH NY 10536 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: PRUDENTIAL SECURITIES INC. Occupation: EXECUTIVE Aggregate Year-to-Date > $ 1,000	6/30/99	$1,000
E. Full Name, Mailing Address and ZIP Code JOHN MCGRAW 3 ARROWHEAD LANE ARMONK NY 10504 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: CIBA CHEMICAL CORP. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 250	6/30/99	$250
F. Full Name, Mailing Address and ZIP Code PETER KAMENSTEIN STONY CREEK FARM SOUTH SALEM NY 10560 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: M. KAMENSTEIN INC. Occupation: EXECUTIVE Aggregate Year-to-Date > $ 1,000	6/10/99	$1,000
G. Full Name, Mailing Address and ZIP Code DOMINICK BERTOCINE 132 BANNON AVENUE BUCHANAN NY 10511 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer: D. BERTOCINE & SONS INC. Occupation: OWNER Aggregate Year-to-Date > $ 1,000	6/10/99	$1,000

SUBTOTAL of Receipts This Page (optional): 4750

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. PAMELA LEVINE ORCHARD HILL ROAD KATONAH NY 10536 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 600	6/30/99	$500
B. HOWARD WASSERMAN 470 PARK AVE S. NY NY 10016 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: ZISSU, GUMBINGER, STOCZAR, WASSERMAN Occupation: ATTORNEY Aggregate Year-to-Date: $ 500	6/30/99	$500
C. SUSAN MARK 625 PARK AVE APT 7A NY NY 10021-6545 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Mark Asset Management Corp. Occupation: Vice - President Aggregate Year-to-Date: $ 500	6/30/99	$500
D. JAMES B WELLES 875 3rd AVENUE NY NY 10022 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: SELF Occupation: SELF EMPLOYED Aggregate Year-to-Date: $ 1,000	6/30/99	$1,000
E. JOHN WARDEN 125 BROAD ST. NY NY 10004 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Sullivan and Cromwell Occupation: Attorney Aggregate Year-to-Date: $ 2,000	6/30/99	$1,000
F. LEONARD LITWIN 1200 UNION TURNPIKE NEW HYDE PARK NY 11040 Receipt For: [X] Primary [X] General [ ] Other (specify):	Name of Employer: GLENWOOD MANAGEMENT CORPORATION Occupation: PRESIDENT Aggregate Year-to-Date: $ 2,000	6/30/99	$2,000
G. MERV BLUNK 128 RADIO CIRCLE MT. KISCO NY 10549 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: M B Real Estate Occupation: Owner Aggregate Year-to-Date: $ 1,000	6/30/99	$1,000

SUBTOTAL of Receipts This Page (optional): 6,500

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

FEC 6-00146

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code ANTHONY AURRICHIO 87 DEVON ROAD BRONXVILLE NY 10708 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 200	6/30/99	$100
B. Full Name, Mailing Address and ZIP Code MARTHA BELL 9 WINDSOR ROAD PITTSBURGH PA 15215 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: HOMEMAKER Aggregate Year-to-Date: $ 200	6/30/99	$100
C. Full Name, Mailing Address and ZIP Code RICHARD CARPENTER MINERAL SPRINGS RD BOX 98 CORNWALL NY 12518 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: SELF EMPLOYED Occupation: REAL ESTATE BROKER Aggregate Year-to-Date: $ 200	6/23/99	$100
D. Full Name, Mailing Address and ZIP Code FRANCIS MACK 3967 ELEANOR DRIVE SHRUB OAK 10588 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 200	6/28/99	$100
E. Full Name, Mailing Address and ZIP Code MAX PETSCHEK 525 E 82ND ST. NEW YORK NY 10028 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Argosy Travel Occupation: PRESIDENT Aggregate Year-to-Date: $ 200	6/30/99	$100
F. Full Name, Mailing Address and ZIP Code FREDRICK REMSEN 213 BALDWIN MT. KISCO NY 10549 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Aggregate Year-to-Date: $ 200	6/30/99	$100
G. Full Name, Mailing Address and ZIP Code ORVILLE SCUTEY PO BOX 295 HUNTER NY 12442 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: HUNTER MOUNTAIN Occupation: GENERAL MANAGER Aggregate Year-to-Date: $ 200	6/30/99	$100

SUBTOTAL of Receipts This Page (optional) $700

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT VANVOLKENBURGH 1 STILLEY ROAD LEBANON NJ 08833 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TOTAL PACKAGING Occupation: PRESIDENT Aggregate Year-to-Date > $ 200	6/30/99	$100
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
WILLIAM VEITINGER 12 LOUDON DRIVE FISHKILL NY 12524-1817 Receipt For: [X] Primary [ ] General [ ] Other (specify):	MEARL CORPORATION Occupation: CHEMICAL WORKER Aggregate Year-to-Date > $ 200	6/23/99	$150
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
CARL DILL 144 TOWN FARM RD NEW MILFORD CT 06776 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 225	6/23/99	$100
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Phyllis Johnson 2803 LARKSPUR ST YORKTOWN HEIGHTS NY 10598 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 225	6/23/99	$50
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
SUZANNE SADOFSKY 6 RICK LANE CORTLANDT MANOR NY 10566 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TODDVILLE REAL ESTATE Occupation: SALES MANAGER Aggregate Year-to-Date > $ 250	4/12/99	$100
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
SUZANE SADOFSKY 6 RICK LANE CORTLANDT MANOR NY 10566 Receipt For: [X] Primary [ ] General [ ] Other (specify):	TODDVILLE REAL ESTATE Occupation: SALES MANAGER Aggregate Year-to-Date > $ 300	6/30/99	$50
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
ADAM RUDOLPH RR 2 Box 379 RT 82 CLINTON CORNERS NY 12514 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date > $ 300	6/30/99	$150

SUBTOTAL of Receipts This Page (optional) 700

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

FEC 6/6/96

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 7 OF 7

FOR LINE NUMBER: 11(a)(i)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS — C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
MERL HUTTO 7 PARTRIDGE ROAD CORNWALL ON HUDSON 12520-1802 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 350	6/23/99	$100
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
CAROLINE BEEBE 100 GREENWICH BEDFORD NY 10506-1717 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: GEORGE LITTLE MANAGEMENT Occupation: CONSULTANT/DIRECTOR Aggregate Year-to-Date: $ 400	6/30/99	$300
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT BISCHOFF 76 WILLETTS RD. MOUNT KISCO NY 10549-1318 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: RETIRED Aggregate Year-to-Date: $ 200	6/30/99	$100
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date: $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date: $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date: $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date: $		

SUBTOTAL of Receipts This Page (optional)	500
TOTAL This Period (last page this line number only)	106,300

FEC-00145

SCHEDULE A — ITEMIZED RECEIPTS (Party's)

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

PAGE 1 OF 1

FOR LINE NUMBER 11(b)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Friends of Ursula LaMotte P.O. Box 187 Katonah, NY 10536 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 1000	2/22/99	1000
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) .....

TOTAL This Period (last page this line number only) 1000

FEBA/2009

EDULE A — ITEMIZED RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

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

PAGE 1 OF 17

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Sue Kelly For Congress C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Local 137 PAC 13160 Pleasantville Road Briarcliff Manor, NY 10510 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	1/29/99	$1000
	Aggregate Year-to-Date > $ 1000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sheet Metal + Roofers Contractors Assoc. 1 Pawling Street Elmsford, NY 10523 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	2/23/99	$250
	Aggregate Year-to-Date > $ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
International Society for Clinical Laboratory Technology Government Education Fund 818 Olive Street, Suite 918 St. Louis, MO 63101 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	2/4/99	$500
	Aggregate Year-to-Date > $ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Greenberg Traurig PAC 1221 Brickell Avenue Miami, Florida 33131 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	2/4/99	$500
	Aggregate Year-to-Date > $ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
REALTORS PAC 430 N. Michigan Ave. Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	3/10/99	$500
	Aggregate Year-to-Date > $ 500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
American Society of Plastic & Reconstructive Surgeons, Inc. PAC 444 E. Algonquin Road Arlington Heights, IL 60005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	3/10/99	$500
	Aggregate Year-to-Date > $ 500		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
The Chase Manhattan Corporation Fund for Good Government 270 Park Avenue New York, NY 10017 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	3/10/99	$500
	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) ..... $ 3,750

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

EDULE A

ITEMIZED RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

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

PAGE 2 OF 17

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code GOLDMAN SACHS PAC [101 PENNSYLVANIA AVENUE N.W. SUITE 900 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $500
B. Full Name, Mailing Address and ZIP Code NATIONAL ASSOCIATION SMALL BUSINESS INVESTMENT COMPANIES 666 - 11th STREET N.W., STE. 750 WASHINGTON DC 20001 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 3,000.	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $3,000.
C. Full Name, Mailing Address and ZIP Code TRANSPORTATION POLITICAL EDUCATION LEAGUE 14600 DETROIT AVENUE CLEVELAND, OH 44107 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $1,000
D. Full Name, Mailing Address and ZIP Code THE CHASE MANHATTAN CORPORATION FUND FOR GOOD GOVERNMENT 270 PARK AVENUE NEW YORK, NY Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $500
E. Full Name, Mailing Address and ZIP Code AMERICAN BANKERS ASSOCIATION 1120 CONNECTICUT AVE., N.W. WASHINGTON, D.C. 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 2000	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $2000
F. Full Name, Mailing Address and ZIP Code THE NATIONAL ASSOCIATION OF LIFE UNDERWRITERS 1922 F ST N.W. WASHINGTON DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $1,000
G. Full Name, Mailing Address and ZIP Code NATIONAL ROOFING CONTRACTORS ASSOCIATION 10255 W. HIGGINS RD NO. 600 ROSEMONT, IL 60018-5607 Receipts For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/5/99	Amount of Each Receipt this Period $500

SUBTOTAL of Receipts This Page (optional) $8,500

TOTAL This Period (last page this line number only)

SCHEDULE A — ITEMIZED RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

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

PAGE 3 OF 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN PORTLAND CEMENT ALLIANCE, INC. PAC 1225 EYE ST., N.W. SUITE 300 WASHINGTON DC 20005	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
PHILIPS ELECTRONICS NORTH AMERICA CORP. PAC 1300 I STREET, N.W. SUITE 1070 EAST WASHINGTON DC	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE 1299 PENNSYLVANIA AVE. N.W. SUITE 1100 WASHINGTON DC 20004-2407	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAIRY FARMERS OF AMERICA, INC. PAC 3253 E. CHESTNUT EXPRESSWAY SPRINGFIELD, MO 65802	Occupation	4/5/99	$500
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	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
AMERICAN MARITIME OFFICERS ACTIONPAC ASSOC. PAC 490 L'ENFANT PLAZA EAST, S.W. SUITE 7204 WASHINGTON DC 20024	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
CENDANT CORPORATION PAC 1225 I STREET N.W. SUITE 500 WASHINGTON DC 20005	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE 10 G STREET, NE SUITE 600 WASHINGTON, D.C. 20002-4215	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) > 3,500

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

EDULE A

ITEMIZED RECEIPTS (PAC'S)

OTHER POLITICAL COMMITTEES

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

PAGE 4 OF 17

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SECURITIES INDUSTRY ASSOCIATION PAC 1401 EYE STREET, N.W. SUITE 1000 WASHINGTON DC 20005-2225	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
USAA GROUP PAC 1615 F STREET NW, SUITE 420 WASHINGTON DC 20004-1004	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
COAEMC COMMUNICATIONS EMPLOYEES PAC 1350 I STREET NW SUITE 500 WASHINGTON DC 20005-3305	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BANK AMERICA CORPORATION PAC TSOK 39000 UNIT 13117 SAN FRANCISCO, CA 94137	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
INVESTMENT MANAGEMENT PAC OF THE INVESTMENT COMPANY INSTITUTE 1401 H STREET, N.W. WASHINGTON DC 20005	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND 1500 K STREET, N.W. SUITE 305 WASHINGTON DC 20005	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
UNION PACIFIC FUND EFFECTIVE GOVERNMENT 600 THIRTEENTH ST. WASHINGTON DC 20005	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) $3,500

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

SCHEDULE A — ITEMIZED RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code ZURICH GROUP PAC 325 7TH ST., N.W. 576. 1225 WASHINGTON, DC 20004-2801 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500
B. Full Name, Mailing Address and ZIP Code NFIB SAFE TRUST 600 MARYLAND AVE. SW STE 700 WASHINGTON DC 20024 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500
C. Full Name, Mailing Address and ZIP Code THE J.P. MORGAN + CO. INCORPORATED PAC 60 WALL STREET NEW YORK, N.Y. 10260 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000	4/5/99	$1,000
D. Full Name, Mailing Address and ZIP Code NY STATE ELECTRIC + GAS PAC 4500 VESTAL PARKWAY EAST BINGHAMTON, NY 13902 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500
E. Full Name, Mailing Address and ZIP Code APPRAISAL INSTITUTE PAC 2600 VIRGINIA AVENUE N.W. SUITE 200 WASHINGTON DC 20037 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500
F. Full Name, Mailing Address and ZIP Code AGC PAC 1957 E STREET N.W. WASHINGTON DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500
G. Full Name, Mailing Address and ZIP Code COUNCIL OF INSURANCE AGENTS + BROKERS PAC 701 PENNSYLVANIA AVENUE, N.W. #750 WASHINGTON DC 20004-2608 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 500	4/5/99	$500

SUBTOTAL of Receipts This Page (optional) $4,000

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

SCHEDULE A — ITEMIZED RECEIPTS (PAC'S) — OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (In Full)

Sue Kelly For Congress C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN MEDICAL PAC 1101 VERMONT AVENUE, N.W. WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	4/27/99	$500
B. Full Name, Mailing Address and ZIP Code AMERICAN HOSPITAL ASSOCIATION PAC 825 SEVENTH STREET, N.W. WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1000	4/27/99	$1,000
C. Full Name, Mailing Address and ZIP Code IRONWORKERS POLITICAL ACTION LEAGUE 1750 NEW YORK AVENUE, N.W. WASHINGTON DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,000	4/27/99	$1,000
D. Full Name, Mailing Address and ZIP Code COUNCIL OF INSURANCE AGENTS & BROKERS PAC 701 PENNSYLVANIA AVENUE N.W. NO 750 WASHINGTON DC 20004-2608 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1000	4/27/99	$500
E. Full Name, Mailing Address and ZIP Code AT&T PAC 32 AVE OF THE AMERICAS NEW YORK, NY 10013 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	4/27/99	$500
F. Full Name, Mailing Address and ZIP Code FEDERAL EXPRESS PAC 1980 NON CONNAH BLVD MEMPHIS, TN 38132 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1000	4/27/99	$1,000
G. Full Name, Mailing Address and ZIP Code DRIVE POLITICAL FUND INTERNATIONAL BROTHERHOOD OF TEAMSTERS 25 LOUISIANA AVENUE, N.W. WASHINGTON DC 20001 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 5000	5/12/99	$5,000

SUBTOTAL of Receipts This Page (optional) $9,500

TOTAL This Period (last page this line number only)

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EDULE A — ITEMIZED RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294400

A. Full Name, Mailing Address and ZIP Code AMERICAN DEVELOPMENT PAC 2201 COOPERATIVE WAY 3rd FLOOR HERNDON VA 20171 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/13/99	Amount of Each Receipt this Period $500
B. Full Name, Mailing Address and ZIP Code AMERICAN TRUCKING PAC AMERICAN TRUCKING ASSOCIATIONS, INC 430 FIRST STREET, S.E. WASHINGTON, DC 20003 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/13/99	Amount of Each Receipt this Period $500
C. Full Name, Mailing Address and ZIP Code INTERNATIONAL UNION OPERATING ENGINEERS LOCAL 15PAC 265 WEST 14th STREET NEW YORK, NY 10011 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/13/99	Amount of Each Receipt this Period $500
D. Full Name, Mailing Address and ZIP Code METROPOLITAN LIFE INSURANCE COMPANY PAC 1620 L STREET N.W. SUITE 800 WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/13/99	Amount of Each Receipt this Period $500
E. Full Name, Mailing Address and ZIP Code AIR LINE PILOT ASSOCIATION - PAC 1625 MASSACHUSETTS AVE, N.W. WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1000	Date (month, day, year) 4/13/99	Amount of Each Receipt this Period $1,000
F. Full Name, Mailing Address and ZIP Code ANA CRNA PAC 222 SOUTH PROSPECT AVENUE PARK RIDGE, ILLINOIS 60068 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/27/99	Amount of Each Receipt this Period $500
G. Full Name, Mailing Address and ZIP Code DELOITTE & TOUCHE PAC PO BOX 365 WASHINGTON DC 20044-0365 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 4/27/99	Amount of Each Receipt this Period $500

SUBTOTAL of Receipts This Page (optional) $4,000

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

EDULE A — ITEMIZED RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Sue Kelly For Congress C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PEPPER HAMILTON LLP PHAS FEDERAL PAC 36th Floor 100 Renaissance Center Detroit, MI 48243-1157	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
NRA-Political Victory Fund 11250 Waples Mill Road Fairfax, VA 22030-7400	Occupation	4/5/99	$500
Receipt For: [X] Primary [ ] General [ ] 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
Mortgage Insurance PAC 727 15th St NW 12th Floor Washington DC 20005	Occupation	4/6/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAS Transportation, Inc. PAC 1231 Pennsylvania Avenue, NW Suite 500 Washington DC 20004	Occupation	4/13/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
International Organization of Masters Mates & Pilots PAC 700 Maritime Blvd Linthicum, MD 21090	Occupation	4/13/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
Society of American Florist PAC 1601 Duke Street Alexandria, VA 22314	Occupation	4/13/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
National Community Pharmacist PAC 205 Daingerfield Road Alexandria VA 22314	Occupation	4/13/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) $3,500

TOTAL This Period (last page this line number only)

EDULE A — ITEMIZED RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

Use separate schedule(s) for each category of the Detailed Summary Page — PAGE 9 OF 17 — FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full)
Sue Kelly For Congress C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL STONE ASSOCIATION PAC 1415 ELLIOT PLACE N.W. WASHINGTON DC 20007 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	5/12/99	$500
B. Full Name, Mailing Address and ZIP Code SVERDRUP CORPORATION PAC 1300 WILSON BLVD. SUITE500 ARLINGTON, VA 22209 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	5/12/99	$500
C. Full Name, Mailing Address and ZIP Code CAGLES POLITICAL LEAGUE 505 12TH ST NW WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 2,500	6/23/99	$2,500
D. Full Name, Mailing Address and ZIP Code THE WISHLIST FEDERAL ACCOUNT 3205 N STREET N.W. WASHINGTON DC 20007 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,000	6/30/99	$1,000
E. Full Name, Mailing Address and ZIP Code ASSOCIATED CREDIT BUREAU INC. PAC 1090 VERMONT AVE. SUITE200 WASHINGTON DC 20005-4905 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	6/30/99	$500
F. Full Name, Mailing Address and ZIP Code COLDMAN SACHS PAC 1101 PENNSYLVANIA AVE NW. SUITE900 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,000	6/30/99	$500
G. Full Name, Mailing Address and ZIP Code NATIONAL HOME EQUITY MORTGAGE ASSOCIATION PAC 1201 PENNSYLVANIA AVE NW SUITE600 WASHINGTON DC 20044-0982 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,000	6/30/99	$1,000

SUBTOTAL of Receipts This Page (optional) $6,500

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

SCHEDULE A — ITEMIZED RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
TERACO Political Involvement Comt. 1090 19th ST N.W. Suite 500 WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date $ 500	6/30/99	$500
B. Full Name, Mailing Address and ZIP Code NATIONAL UTILITY CONTRACTORS ASSOC. PAC 4301 FAIRFAX DRIVE #360 ARLINGTON VA 22203 Receipt For: [ ] Primary [X] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $1,000
C. Full Name, Mailing Address and ZIP Code FLORIDA CRYSTALS PAC 915 15th ST N.W. SUITE 800 WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
D. Full Name, Mailing Address and ZIP Code METROPOLITAN LIFE INSURANCE COMPANY PAC 1620 L ST N.W SUITE 800 WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 1,500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $1,000
E. Full Name, Mailing Address and ZIP Code NATIONAL ASSOCIATION OF LIFE UNDERWRITERS PAC 1922 F ST N.W. WASHINGTON DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 2,500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $1,500
F. Full Name, Mailing Address and ZIP Code UNION PACIFIC CORPORATION FUND EFFECTIVE GOVERNMENT 600 13th ST. N.W. Suite 340 WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
G. Full Name, Mailing Address and ZIP Code REALTORS POLITICAL ACTION COMMITTEE 430 NORTH MICHIGAN AVENUE CHICAGO IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Name of Employer / Occupation Aggregate Year-to-Date $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500

SUBTOTAL of Receipts This Page (optional) $5,500

TOTAL This Period (last page this line number only)

SCHEDULE A — ITEMIZED RECEIPTS (PAC'S)

OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UPS PAC 55 GLENLAKE PARKWAY NE ATLANTA GA 30328 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 4,500	6/30/99	$4,500
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NEW YORK LIFE PAC 51 MADISON AVENUE NY NY 10010 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 500	6/30/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ERNST & YOUNG PAC AVENUE N.W. SUITE CONNECTICUT WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 1,000	6/30/99	$1,000
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TRANSPORTATION POLITICAL EDUCATION LEAGUE 14600 DETROIT AVENUE CLEVELAND OHIO NY 44107 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 3,500	6/30/99	$2,500
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AIRLINE PILOTS ASSOCIATION PAC 1625 MASSACHUSETTS AVE. NW WASHINGTON DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 1500	6/30/99	$500
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
REINSURANCE ASSOCIATION OF AMERICA PAC 1301 PENNSYLVANIA AVE NW SUITE 900 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 1,000	6/30/99	$1,000
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN COUNCIL OF LIFE INSURANCE PAC 10001 PENNSYLVANIA AVE NW WASHINGTON DC 20004-2599 Receipt For: [X] Primary [ ] General [ ] Other (specify)	Occupation Aggregate Year-to-Date > $ 1,000	6/30/99	$1,000

SUBTOTAL of Receipts This Page (optional) $11,000

TOTAL This Period (last page this line number only)

4-00

SCHEDULE A ITEM D RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 12 OF 17 | FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL STONE ASSOCIATION PAC 1415 ELLIOT PLACE N.W. WASHINGTON DC 20007 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000	6/30/99	$500
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN MARITIME OFFICERS RETIREES ASSOCIATION PAC 490 L'ENFANT PLAZA EAST S.W. SUITE 7204 WASHINGTON DC 20024 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000	6/30/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NEW YORK MERCANTILE EXCHANGE PAC 1 NORTHEND AVE, WORLD FINANCIAL CENTER NY NY 10282 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500	6/30/99	$500
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL TOOLING & MACHINING ASSOCIATION PAC PO BOX 44162 FORT WASHINGTON MD 20749-4162 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500	6/30/99	$500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN CONSULTING ENGINEERS COUNCIL PAC 1015 15th ST N.W. SUITE 802 WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500	6/30/99	$500
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF AMERICA PAC 1401 NEW YORK AVENUE N.W. SUITE 1110 WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500	6/30/99	$500
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
HUMAN RIGHTS CAMPAIGN PAC 919 18th ST NW SUITE 800 WASHINGTON DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000	6/30/99	$ 1,000

SUBTOTAL of Receipts This Page (optional) $4,000

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

4-00148

SCHEDULE A — ITEM. ☐ RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code AMERICAN INSURANCE ASSOCIATION PAC 1130 CONNECTICUT AVENUE NW SUITE 1000 WASHINGTON DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
B. Full Name, Mailing Address and ZIP Code SNIDLER, BERLIN, SHEREFF, FRIEDMAN LLP PAC 3000 K ST. N.W. SUITE 300 WASHINGTON DC 20007 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
C. Full Name, Mailing Address and ZIP Code SECURITIES INDUSTRY ASSOCIATION PAC 1401 EYE ST N.W. SUITE 1,000 WASHINGTON DC 20005/2225 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
D. Full Name, Mailing Address and ZIP Code BNSF RAIL PAC PO BOX 961039 FORT WORTH TEXAS 76161-0039 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 500	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
E. Full Name, Mailing Address and ZIP Code NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE PAC 10 G ST. NE SUITE 600 WASHINGTON DC 20002-4215 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $500
F. Full Name, Mailing Address and ZIP Code BELL ATLANTIC PAC 1717 ARCH ST PHILADELPHIA, PENNSYLVANIA 19103 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $1,000
G. Full Name, Mailing Address and ZIP Code DELOITTE AND TOUCHE PAC PO BOX 365 WASHINGTON DC 20004-0365 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 2,000	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period $1,500
SUBTOTAL of Receipts This Page (optional)			$5,000
TOTAL This Period (last page this line number only)			

FEC FORM 3 (2/94)

SCHEDULE A — ITEMIZED RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MANUFACTURED HOUSING INSTITUTE PAC 2101 WILSON BLVD. SUITE 610 ARLINGTON VA 22201-3062		6/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
IRONWORKERS PAC 1150 New York AVE NW WASHINGTON DC 20006		6/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 2,000		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
INDEPENDENT BANKERS PAC 1 THOMAS CIRCLE NW SUITE 406 WASHINGTON DC 20005		6/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JP MORGAN AND COMPANY PAC 60 WALL STREET NY NY 10260		6/30/99	$500
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN BANKERS ASSOCIATION PAC 1120 CONNECTICUT AVE NW WASHINGTON DC 20036		6/30/99	$2,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 4,000		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
TELEVISION AND RADIO PAC 1771 N STREET NW WASHINGTON DC 20036		6/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BUILDING AND CONSTRUCTION TRADES PAC 815 16th ST N.W. Room 603 WASHINGTON DC 20006		6/30/99	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000		

SUBTOTAL of Receipts This Page (optional) $7,500

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

SCHEDULE A ITEM: 3 RECEIPTS (PAC'S)

OTHER POLITICAL COMMITTEES

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 15 OF 17 | FOR LINE NUMBER (11c)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
FARM CREDIT PAC 50 F STREET NW SUITE 900 WASHINGTON DC 20001 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/30/99	$1,000 Aggregate Year-to-Date > $ 1,000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BANKERS TRUST PAC PO BOX 318 MAIL STOP 2272 CHURCH STREET STATION NYNY 10008 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/30/99	$2,000 Aggregate Year-to-Date > $ 2,000
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
GENERAL ELECTRIC PAC 1299 PENNSYLVANIA AVE N.W. SUITE 1100 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/30/99	$300 Aggregate Year-to-Date > $ 800
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BANK OF AMERICA PAC 1401 NEW YORK AVENUE NW. SUITE 1110 WASHINGTON DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/30/99	$500 Aggregate Year-to-Date > $ 1,000
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
COUNCIL OF INSURANCE AGENTS & BROKERS PAC 701 PENNSYLVANIA AVE NW #750 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/10/99	$1,000 Aggregate Year-to-Date > $ 2000
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
FIRST UNION CORPORATION PAC 1 FIRST UNION CENTER 301 SOUTH COLLEGE ST CHARLOTTE, NC 28288 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/10/99	$1,000 Aggregate Year-to-Date > $ 1,000
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
ELECTRICAL CONSTRUCTION PAC 33 BETHESDA METRO CENTER BETHESDA MD 20814-5372 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	6/10/99	$500 Aggregate Year-to-Date > $ 500

SUBTOTAL of Receipts This Page (optional) $6,300

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

FEC Form 3 (1997)

SCHEDULE A — ITEM D RECEIPTS (PAC's) — OTHER POLITICAL COMMITTEES

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 16 OF 17 | FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full): SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CITYGROUP PAC 1101 PENNSYLVANIA AVE. N.W. SUITE 1000 WASHINGTON DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 3,000	6/30/99	$3,000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL ASSOCIATION MORTGAGE BROKERS PAC 8201 GREENSBORO DRIVE SUITE 300 MCLEAN VA 22102 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	6/30/99	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
YELLOW CORPORATION PAC 10990 ROE AVENUE OVERLAND PARK KS 66211 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	6/30/99	$500
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
CHASE MANHATTAN PAC 270 PARK AVENUE NY NY 10017 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	6/30/99	$500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
THE AMERICAN SOCIETY OF PLASTIC & RECONSTRUCTIVE SURGEONS PAC 444 E ALGONQUIN RD. ARLINGTON HEIGHTS, IL 60005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,000	6/30/99	$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN OPTOMETRIC ASSOCIATION PAC 1505 PRINCE ST. SUITE 300 ALEXANDRIA VA 22314 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $	6/30/99	$500
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
PRUDENTIAL SECURITIES PAC ONE SEAPORT PLAZA NEW YORK NY 10292 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $ 500	6/30/99	$500

SUBTOTAL of Receipts This Page (optional) ..... $ 6,000

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

4-00145

SCHEDULE A — ITEM D RECEIPTS (PAC's)

OTHER POLITICAL COMMITTEES

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 17 OF 17 | FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
FEDERAL EXPRESS PAC 1680 NONCONNAH BLVD. MEMPHIS TN 38132	Occupation	6/30/94	$1,000
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 2000		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 93,050

4-00148

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CHRISTOPHER FISH 44 BRYANT ST. POUGHQUAG NY 12570	CAMPAIGN 98 BONUS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/4/99	$10,000
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C HAPPAQUA VAN LINES 183 OLD RT 9 FISHKILL NY 12524	VAN RENTAL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/6/99	$1,400.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$51.47
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$47.93
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FED EX PO BOX 1140 MEMPHIS, TN 38101-1140	MAILERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$34.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
YESHIVA OHR HAMEIR FURNACE WOODS ROAD PO BOX 2180 PEEKSKILL NY 10566	DONATION DINNER TICKETS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BEEKMAN WOMEN'S REPUBLICAN CLUB 218 CLAPPVILLE ROAD LA GRANGEVILLE, NY 12540	DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$22.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PUTNAM VALLEY REPUBLICAN COMMITTEE PO BOX 288 PUTNAM VALLEY N.Y. 10579	DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$100.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STEVE GOLDBACK 31 DEANS BRIDGE SOMERS N.Y. 10589	OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/12/99	$12.68

SUBTOTAL of Disbursements This Page (optional) 12,168.08

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Disbursement for: Primary / General / Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. HOUSE OF PRINTING 58 EAST CENTRAL AVENUE PEARL RIVER NY 10965	MAILING PRINTING		1/12/99	$370.01
B. THE JOSI ORGANIZATION PO BOX 676 KATONAH NY 10536	CONSULTING FEE		1/12/99	$3,576.32
C. CHRIS FISH 44 BRYANT ST. POUGHQUAG NY 12570	TRAVEL EXPENSES		1/12/99	$28.00
D. THE TOWNSEND GROUP BOX 517 ONE DEER HILL ROAD EXTENSION CORNWALL ON HUDSON NY 12520	PROFESSIONAL SERVICES		1/12/99	$15,000.00
E. BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	PHONE BILL		1/19/99	$51.47
F. SANOSSIAN SARDISCO LLP 660 WHITE PLAINS RD TARRYTOWN NY 10591	PROFESSIONAL SERVICES		1/27/99	$390.00
G. FED EX PO BOX 1140 MEMPHIS TN 38101-1140	MAILERS		1/27/99	$60.50
H. SALLY COLLINS 802 BEVERLY DRIVE ALEXANDRIA VA 22302	SUPPLIES		1/27/99	$64.35
I. CHRIS FISH 44 BRYANT ST POUGHQUAG NY 12570	FILM DEVELOPMENT		1/27/99	$48.75

SUBTOTAL of Disbursements This Page (optional) 19,589.40

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BELL ATLANTIC PO BOX 15124 ALBANY NY 12212-5124	PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/27/99	$186.43
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ORANGE COUNTY REPUBLICAN COMMITTEE 14 RAILROAD AVENUE CHESTER NY 10918	CHAIRMAN'S CLUB MEMBERSHIP Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/27/99	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CAPITOL HILL CLUB 300 FIRST ST. S.E. WASHINGTON DC 20003	LUNCHEON Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/27/99	$3480.30
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE JOSI ORGANIZATION PO BOX 676 KATONAH NY 10536	PROFESSIONAL SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/20/99	$2841.62
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STEPHENS FOR ASSEMBLY PO BOX 735 BREWSTER NY 10509	DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/5/99	$100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HANNIBAL SOFTWARE INC. 208 G ST N.E. WASHINGTON DC 20002	SOFTWARE PURCHASE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/2/99	$2,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NY STATE FEDERATION OF REPUBLICAN WOMEN 315 STATE ST ALBANY NY 12210	JOURNAL AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/22/99	$100.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ORANGE COUNTY REPUBLICAN COMMITTEE 14 RAILROAD AVENUE CHESTER NY 10918	TICKETS ANNUAL DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/22/99	$175.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DUTCHESS COUNTY CLERK DUTCHESS COUNTY OFFICE BLDG. 22 MARKET STREET POUGHKEEPSIE NY 12601	NOTARY RENEWALS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/22/99	$30.00

SUBTOTAL of Disbursements This Page (optional) $9,413.35

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code KATONAH POSTMASTER US POST OFFICE KATONAH NY 10536	Purpose of Disbursement PURCHASE STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $99.00
B. Full Name, Mailing Address and ZIP Code NEW MEXICANS FOR BILL REDMOND PO BOX 5747 SANTA FE NM 87502	Purpose of Disbursement DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $500.00
C. Full Name, Mailing Address and ZIP Code HOUSE OF PRINTING 56 EAST CENTRAL AVENUE PEARL RIVER NY 10985	Purpose of Disbursement MAILING PRINTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $935.22
D. Full Name, Mailing Address and ZIP Code BELL ATLANTIC PO BOX 1100 ALBANY NY 12250	Purpose of Disbursement PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $183.36
E. Full Name, Mailing Address and ZIP Code CARLS FISH 44 BRYANT ST. POUGHQUAG NY 12570	Purpose of Disbursement TRAVEL EXPENSES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $45.17
F. Full Name, Mailing Address and ZIP Code SLEEPY HOLLOW REPUBLICAN COMMITTEE 62 DEVRIES AVENUE SLEEPY HOLLOW	Purpose of Disbursement DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/22/99	Amount of Each Disbursement This Period $20.00
G. Full Name, Mailing Address and ZIP Code ON LOCATION STUDIOS INC. 120 DUTCHESS TURNPIKE POUGHKEEPSIE N.Y. 12603	Purpose of Disbursement FILM DEVELOPMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/4/99	Amount of Each Disbursement This Period $140.00
H. Full Name, Mailing Address and ZIP Code EXECUTIVE PRESS INC. 10412 MAIN ST FAIRFAX VA 22030	Purpose of Disbursement MAILING PRINTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/10/99	Amount of Each Disbursement This Period $685.82
I. Full Name, Mailing Address and ZIP Code BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	Purpose of Disbursement PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/10/99	Amount of Each Disbursement This Period $87.69

SUBTOTAL of Disbursements This Page (optional) $2,696.26

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. BELL ATLANTIC MOBILE PO BOX 15559 WORCESTER MA 01615-0559	CELL PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/9/99	$139.23
B. DEBORAH EISENBAUER 63 S. CLOVER ST POUGHKEEPSIE NY 12601	Purpose of Disbursement: REIMBURSEMENT TICKETS UNITED WAY DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/10/99	$12.00
C. CHRISTOPHER FISH 44 BRYANT ST POUGHQUAG NY 12570	Purpose of Disbursement: TRAVEL EXPENSES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/10/99	$47.71
D. THE JOSI ORGANIZATION PO BOX 676 KATONAH NY 10536	Purpose of Disbursement: PROFESSIONAL SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/10/99	$3160.75
E. SUZANNE MIZEC 1164 NORTH DEARBORN APT 201 CHICAGO IL 60610	Purpose of Disbursement: ADMINISTRATIVE WORK Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/10/99	$1,188.96
F. BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	Purpose of Disbursement: PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	$103.00
G. FEDEX PO BOX 1140 MEMPHIS TN 38101-1140	Purpose of Disbursement: MAILERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/19/99	$46.00
H. GEORGE SANOSSIAN 23 RIDGECREST WEST SCARSDALE NY 10563	Purpose of Disbursement: PROFESSIONAL SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	$300.00
I. CROSTREES KITTLE HOUSE 11 KITTLE ROAD CHAPPAQUA NY 10514	Purpose of Disbursement: FUNDRAISING DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	$4,361.00

SUBTOTAL of Disbursements This Page (optional) $9,358.65

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code POSTMASTER KATONAH US POST OFFICE KATONAH NY 10536	PURCHASE STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/99	$990.00
B. Full Name, Mailing Address and ZIP Code POSTMASTER KATONAH US POST OFFICE KATONAH N.Y. 10536	PURCHASE STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$100.00
C. Full Name, Mailing Address and ZIP Code MJ & COMPANY SUITE 700 60 STATE ST BOSTON MA 02109-1803	FILM DEVELEPMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$365.61
D. Full Name, Mailing Address and ZIP Code TOWN OF WAPPINGERS REPUBLICAN COMMITTEE PO BOX 1412 WAPPINGERS FALLS NY 12590	JOURNAL AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$125.00
E. Full Name, Mailing Address and ZIP Code NEW YORK STATE CONSERVATIVE PARTY 325 PARKVIEW DRIVE SCHENECTADY NY 12303-5644	JOURNAL AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$300.00
F. Full Name, Mailing Address and ZIP Code TOWN OF FISHKILL REPUBLICAN COMMITTEE 4 MAPLE AVENUE FISHKILL NY 12524	ATTEND FUNDRAISER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$25.00
G. Full Name, Mailing Address and ZIP Code MARSHALL GRANGER SeNOSSIAN & SARRIS LLP 660 WHITE PLAINS RD TARRYTOWN NY 10591	PROFESSIONAL SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$623.00
H. Full Name, Mailing Address and ZIP Code PUTNAM COUNTY REPUBLICAN COMMITTEE PO BOX 203 CARMEL NY 10512	JOURNAL AD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/27/99	$100.00
I. Full Name, Mailing Address and ZIP Code WESTCHESTER COUNTY CONSERVATIVE PARTY 129 BRITE AVENUE SCARSDALE NEW YORK 10583	ATTEND ANNUAL DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$1,000.00
SUBTOTAL of Disbursements This Page (optional)			$3628.61
TOTAL This Period (last page this line number only)			

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

SUE KELLY FOR CONGRESS C00294900

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. ALZHEIMER'S ASSOCIATION 2L FREEDOM PLAINS RD SUITE 102 POUGHKEEPSIE NY 12603	DONATION Disbursement for: Primary General Other (specify)	3/29/99	$150.00
B. BELL ATLANTIC PO BOX 15124 ALBANY NY 12212	PHONE BILL Disbursement for: Primary General Other (specify)	4/5/99	$120.11
C. DUTCHESS COUNTY BAR ASSOCIATION POST OFFICE BOX 4865 POUGHKEEPSIE NY 12601	ATTEND ANNUAL DINNER Disbursement for: Primary General Other (specify)	4/5/99	$60.00
D. FED EX PO BOX 1140 MEMPHIS, TN 38101-1140	MAILERS Disbursement for: Primary General Other (specify)	4/5/99	$13.75
E. WESTCHESTER GOP 214 MAMARONECK AVENUE WHITE PLAINS, NY 10601	JOURNAL AD Disbursement for: Primary General Other (specify)	4/5/99	$450.00
F. THE JOSI ORGANIZATION PO BOX 676 KATONAH NY 10536	PROFESSIONAL SERVICES Disbursement for: Primary General Other (specify)	4/5/99	$1918.94
G. TOWN OF POUGHKEEPSIE REPUBLICAN COMMITTEE 47 LONGVIEW ROAD POUGHKEEPSIE NY 12603	DINNER TICKETS Disbursement for: Primary General Other (specify)	4/5/99	$50.00
H. UNITED STATES POST OFFICE KATONAH POST MASTER KATONAH NY 10536	BUS. REPLY CARD ANNUAL RENEWL Disbursement for: Primary General Other (specify)	4/12/99	$300.00
I. BELL ATLANTIC PO BOX 1100 ALBANY NY 12250	PHONE BILL Disbursement for: Primary General Other (specify)	4/12/99	$66.21

SUBTOTAL of Disbursements This Page (optional) $3,129.01

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

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code NEW YORK STATE CONSERVATIVE PARTY 486 78TH ST FORT HAMILTON STATION NY 11209	TICKETS ANNIVERSARY DINNER Disbursement for: Primary General Other (specify)	4/12/99	$5,000.00
B. Full Name, Mailing Address and ZIP Code FED EX PO BOX 1140 MEMPHIS TN 38101-1140	MAILERS Disbursement for: Primary General Other (specify)	4/12/99	$11.50
C. Full Name, Mailing Address and ZIP Code HYATT HOTEL & RESORTS 1000 H STREET WASHINGTON DC 20001	BREAKFAST RECEPTION Disbursement for: Primary General Other (specify)	4/12/99	$499.40
D. Full Name, Mailing Address and ZIP Code PUTNAM COUNTY REPUBLICAN COMMITTEE PO BOX 361 CARMEL NY 10512	TICKETS DINNER DINNER Disbursement for: Primary General Other (specify)	4/13/99	$100.00
E. Full Name, Mailing Address and ZIP Code TOWN OF WOPPINGERS REPUBLICAN COMMITTEE PO BOX 1412 WOPPINGERS FALLS, NY 12590	TICKETS ANNUAL DINNER Disbursement for: Primary General Other (specify)	4/16/99	$50.00
F. Full Name, Mailing Address and ZIP Code HAMMOND & ASSOCIATES 801 N. PITT STREET, SUITE 120 ALEXANDRIA, VA 22314	PROFESSIONAL SERVICES Disbursement for: Primary General Other (specify)	4/16/99	3,353.43
G. Full Name, Mailing Address and ZIP Code SANDRA REYES 15 COOKCLOSE ROAD RIDGEFIELD CT. 06877	CATERING DINNER EVENT Disbursement for: Primary General Other (specify)	4/14/99	$125.00
H. Full Name, Mailing Address and ZIP Code PUTNAM COUNTY REPUBLICAN COMMITTEE BOX 203 CARMEL NY 10512	TICKETS ANNUAL DINNER Disbursement for: Primary General Other (specify)	4/27/99	$100.00
I. Full Name, Mailing Address and ZIP Code FEDEX PO BOX 1140 MEMPHIS TN 38101-1140	MAILERS Disbursement for: Primary General Other (specify)	4/27/99	$32.00

SUBTOTAL of Disbursements This Page (optional) $9,221.33

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 9 OF 11

FOR LINE NUMBER 17

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)

SUE KELLY FOR CONGRESS C00294900

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. HOUSE OF PRINTING 56 EAST CENTRAL AVENUE PEARL RIVER, NY 10965	PRINTING MAILERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/27/99	$311.03
B. FEDEX PO BOX 1140 MEMPHIS TN 38101-1140	MAILERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/5/99	$15.75
C. CHRISTOPHER FISH 44 BRYANT ST POUGHQUAG NY 12570	PURCHASE OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/5/99	$41.58
D. CROWN TROPHY 529 NORTH STATE ROAD BRIARCLIFF NY 10510	PURCHASE TROPHY AWARDS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/5/99	$210.00
E. THE JOSI ORGANIZATION PO BOX 676 KATONAH NY 10536	PROFESSIONAL SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/6/99	$1,500.00
F. NATIONAL ALBANIAN AMERICAN COUNCIL 1899 L ST N.W. SUITE 1130 WASHINGTON DC 20036	TICKETS ANNUAL DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/5/99	$500.00
G. BELL ATLANTIC PO BOX 1100 ALBANY NY 12250-0001	PHONE BILL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/12/99	$230.10
H. PUTNAM HOSPITAL CENTER AUXILIARY STONELEIGH AVENUE CARMEL NY 10512	DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/12/99	$125.00
I. CHRIS FISH 44 BRYANT ST POUGHQUAG NY 12570	FILM DEVELOPMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/14/99	$60.00

SUBTOTAL of Disbursements This Page (optional) $3,013.46

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 10 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

SUE KELLY FOR CONGRESS C00294900

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code HOLIDAY ON WHEELS INC RT 22 ROBINHILL CORPORATE PARK PATTERSON NY 12563	CAMPAIGN VAN SERVICES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/17/99	$459.35
B. Full Name, Mailing Address and ZIP Code Katonah Postmaster Po Box 599 Katonah, NY 10536	Purpose of Disbursement Mailer Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/1/99	Amount of Each Disbursement This Period $1,089.00
C. Full Name, Mailing Address and ZIP Code Chris Fish 44 Bryant Rd Poughquag, NY 10570	Purpose of Disbursement Dinner for Volunteer Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $32.50
D. Full Name, Mailing Address and ZIP Code Summit Aviation 7144 Republic Airport East Farmingdale, NY 11735	Purpose of Disbursement Return flight to DC Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $296.00
E. Full Name, Mailing Address and ZIP Code Jones Farm Inc. 190 Angola Rd Cornwall, NY 12518	Purpose of Disbursement Donation - Cornwall GOP Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $37.54
F. Full Name, Mailing Address and ZIP Code US Postal Service Katonah Postmaster Katonah, NY 10536	Purpose of Disbursement Po Box Annual Fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $44.00
G. Full Name, Mailing Address and ZIP Code Fedex Po Box 1144 Memphis, Tennessee 38101-1140	Purpose of Disbursement Mailer Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $14.75
H. Full Name, Mailing Address and ZIP Code The Josi Organization Po Box 676 Katonah, NY 10536	Purpose of Disbursement Professional Services Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $1,725.89
I. Full Name, Mailing Address and ZIP Code Republican Dinner Theater '99 Po Box 2029 - Suite 175 Hyde Park, NY 12538	Purpose of Disbursement Purchase Tickets to Annual Dinner Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period $1,350

SUBTOTAL of Disbursements This Page (optional) $5,049.03

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 11 OF 11

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

SUE KELLY FOR CONGRESS C00294900

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code WESTCHESTER COUNTY REPUBLICAN COMMITTEE 214 MAMARONECK AVENUE WHITE PLAINS, NEW YORK 10601	TICKETS ANNUAL DINNER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/27/99	$1,250.00
B. Full Name, Mailing Address and ZIP Code KATONAH POSTMASTER US POST OFFICE KATONAH NY 10536	Purpose of Disbursement POSTAGE DUE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/10/99	$150.00
C. Full Name, Mailing Address and ZIP Code THE BANK OF NEW YORK 140 KATONAH AVENUE KATONAH NY 10536	Purpose of Disbursement PRINTING OF CHECKS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/29/99	$24.99
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) $1,424.99

TOTAL This Period (last page this line number only) $78,742.17

SCHEDULE C
(Revised 3/90)

LOANS

Page 1 of 4 for
LINE NUMBER 4c
(Use separate schedules for each numbered line)

Name of Committee (in Full)
SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
SUE W. KELLY 157 JAY STREET KATONAH NY 10536 Election: _ Primary _ General _ Other (specify):	* 5,000 -	—	5,000 -
Terms: Date Incurred 4/21/94 Date Due DEMAND Interest Rate ____%(apr)			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: $
* FROM PERSONAL FUNDS	
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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: _ Primary _ General _ Other (specify):	$		
Terms: Date Incurred ____ Date Due ____ Interest Rate ____%(apr)			Secured

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: $
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) .....

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

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SCHEDULE C
(Revised 3/80)

LOANS

Page 2 of 4 for
LINE NUMBER 4
(Use separate schedules for each numbered line)

Name of Committee (in Full)
SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan *	Cumulative Payment To Date	Balance Outstanding at Close of this Period
SUE W. KELLY 157 JAY STREET KATONAH NY 10536 Election: ... Primary .. General _ Other (specify):	$7,000—	—	$7,000—

Terms: Date Incurred 4/29/96 Date Due DEMAND Interest Rate, ____%(apr) . 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: $
* FROM PERSONAL FUNDS	
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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: . i Primary . General . Other (specify):			

Terms: Date Incurred_____ Date Due_____ Interest Rate_____%(apr) Secured

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: $
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)	

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

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SCHEDULE C
(Revised 3/80)

LOANS

Page 3 of 4 for
LINE NUMBER 4K
(Use separate schedules for each numbered line)

Name of Committee (In Full)
SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
SUE W. KELLY 157 JAY STREET KATONAH NY 10536 Election: ☐ Primary ☐ General ☐ Other (specify):	* 4,544.22	—	4,544.22

Terms: Date Incurred 6/28/94 Date Due DEMAND Interest Rate ____%(apr) ☐ 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: $
* FROM PERSONAL FUNDS	
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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred ____ Date Due ____ Interest Rate ____%(apr) ☐ Secured

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: $
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)	

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

FE8AN111

SCHEDULE C
(Revised 3/80)

LOANS

Page 4 of 4 for LINE NUMBER 4
(Use separate schedules for each numbered line)

Name of Committee (In Full)
SUE KELLY FOR CONGRESS C00294900

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan *	Cumulative Payment To Date	Balance Outstanding at Close of This Period
SUE W. KELLY 157 JAY STREET KATONAH NY 10536 Election: _ Primary _ General _ Other (specify):	78,000--	25,000	53,000

Terms: Date Incurred 4/20/94 Date Due DEMAND Interest Rate ____%(apr) _ 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: $
* FROM PERSONAL FUNDS	
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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: _ Primary _ General _ Other (specify):			

Terms: Date Incurred ____ Date Due ____ Interest Rate ____%(apr) _ Secured

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: $
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)	111,544

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

FE3AN111

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☒	Hand Delivered	Date of Receipt 08/03/99
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SN — PREPARER

08/03/99 — DATE PREPARED

(4/96)