

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

JUL 15 1 20 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>PETE KING FOR CONGRESS COMM.</b>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>Box 1428</b>	
CITY, STATE and ZIP CODE <b>SEAFORD, N.J. 11783</b>	STATE/DISTRICT <b>NY 3</b>
2. FEC IDENTIFICATION NUMBER <b>C00272211</b>	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

### 4. TYPE OF REPORT

- April 15 Quarterly Report  12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- July 15 Quarterly Report  30-Day Post-Election Report for the \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- October 15 Quarterly Report  January 31 Year End Report  July 31 Mid-Year Report (Non-election Year Only)  Termination Report

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>April 1, 1996 through JUNE 30, 1996</b>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<b>75924.00</b>	
(b) Total Contribution Refunds (from Line 20(d))		<b>500.00</b>
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	<b>75924.00</b>	
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<b>24592.54</b>	<b>41254.94</b>
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	<b>24592.54</b>	<b>16662.40</b>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<b>275,482.41</b>	
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)		

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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 <b>EUGENE TURNER</b>	Date <b>7/13/96</b>
Signature of Treasurer <i>Eugene Turner</i>	

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

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FEC FORM 3  
(revised 4/87)

# DETAILED SUMMARY PAGE

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

Name of Committee (in full)	Report Covering the Period:	
	From:	To:
<b>I. RECEIPTS</b>		
11. CONTRIBUTIONS (other than loans) FROM:	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-To-Date
(a) Individuals/Persons Other Than Political Committees	16,000.00	72,282.00
(i) Itemized (use Schedule A) -----	18,224.00	<del>54,354.00</del>
(ii) Unitemized -----	34,224.00	64,700.00
(iii) Total of contributions from individuals -----	41,700.00	75,924.00
(b) Political Party Committees -----	75,924.00	142,282
(c) Other Political Committees (such as PACs) -----		
(d) The Candidate -----		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	75,924.00	142,282
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----		
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----		
(b) All Other Loans -----		
(c) TOTAL LOANS (add 13(a) and (b)) -----		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	75,924.00	142,282
<b>II. DISBURSEMENTS</b>		
17. OPERATING EXPENDITURES -----	24,592.54	41,254.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	-	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----	-	
(b) Of All Other Loans -----	-	
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	-	
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----	-	500.00
(b) Political Party Committees -----	-	
(c) Other Political Committees (such as PACs) -----	-	
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	-	500.00
21. OTHER DISBURSEMENTS -----	-	
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	24,592.54	41,754.94

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 224,150.95	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 75,924.00	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 300,074.95	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 24,592.54	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 275,482.41	27

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)  
**PETE KING FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ames Bernard 362 Maryland Avenue Freeport NY 11520		4/15/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>retired</b>	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anderman Basil 10450 Wilshire Boulevard Los Angeles CA 90024	self	6/18/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>benefit consultant</b>	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bingham Eileen 82 Cypress Woodbury NY 11797		4/18/96	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <i>housewife</i>	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Block Michael 330 East 75th Street New York NY 10021	self	6/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>attorney</b>	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bloom Ronald 9777 Wilshire Boulevard Beverly Hills CA 90212	Crown Asso Realty	6/5/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Coben Lawrence One Fishwood Court Atkinson NH 03811	Liberty Power	5/20/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Managing Director</b>	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Comm. to Re-elect <i>SUSAN MOLINARI</i> PO Box 060248 New Dorp, Staten Island NY 10306		6/20/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00

SUBTOTAL of Receipts This Page (optional) ..... **5000.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 1121

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

NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donovan Daniel 1 Sidney Street Plainview NY 11803	TOWN OF OYSTER BAY ADMINISTRATOR	4/1/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Feith Dalck 8134 High School Road Elkins Park PA 19117	Natl Jewish Coalit.	4/1/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Finn Joseph 52 Argonne Road East Hampton Bays NY 11946	self	4/1/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hazan Lawrence 39-35 Skillman Avenue Long Island City NY 11104		6/20/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Keough Donald 200 Galleria Parkway Atlanta GA 30339	Allen and Company	4/15/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Longua Lawrence 124 Southard Avenue Rockville Centre NY 11570	Mitsubishi Trust	4/1/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mahoney Richard 47-39 157th Street Flushing NY 11355	self	4/1/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00

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

400.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**PETE KING FOR CONGRESS COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> McCann Robert 67-35 Yellowstone Boulevard Forest Hills NY 11375 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Brown, Harris, Stevens LLC Occupation Maintenance Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 4/15/96	Amount of Each Receipt this Period \$250.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Meltzer Lewis 190 Willis Avenue Mineola NY 11501 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 5/10/96	Amount of Each Receipt this Period \$1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> NYNEX 125 High Street Rm. 309 Boston MA 02110-2721 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation refund Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 4/10/96	Amount of Each Receipt this Period \$1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Schmitt Charles 2207 Southard Avenue Seaford NY 11783 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation funeral director Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 5/16/96	Amount of Each Receipt this Period \$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Schroeder Edmund 100 Maiden Lane Rm 929 New York NY 10038 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cadwalader Wickersham and Taft Occupation attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 4/18/96	Amount of Each Receipt this Period \$250.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Schwartz Ronald 246-16 Union Turnpike Bellerose NY 11426 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/10/96	Amount of Each Receipt this Period \$500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Scibelli Gabriel 83 Kingsbury Road Garden City NY 11530 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Overton and Co. Occupation customs broker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 4/15/96	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional) ..... 4000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**PETE KING FOR CONGRESS COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> Singer Paul 170 Tekening Drive Tenafly NJ 07067	Name of Employer <i>Broxton Assoc.</i>	Date (month, day, year) 4/26/96	Amount of Each Receipt this Period \$1,000.00
	Occupation <i>Investment Counselor</i>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

<b>B. Full Name, Mailing Address and ZIP Code</b> Singer Linda 170 Tekening Drive Tenafly NJ 07670	Name of Employer	Date (month, day, year) 4/26/96	Amount of Each Receipt this Period \$1,000.00
	Occupation <i>housewife</i>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

<b>C. Full Name, Mailing Address and ZIP Code</b> Sohacheski Marilyn 714 North Palm Drive Beverly Hills CA 90210	Name of Employer	Date (month, day, year) 6/10/96	Amount of Each Receipt this Period \$1,000.00
	Occupation <i>housewife</i>		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	16000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 17  
FOR LINE NUMBER 115

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AICPA Effective Leg. Comm. 1455 Pennsylvania Avenue NW Washington DC 20004		4/18/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALPA PAC 1625 Massachusetts Avenue NW Washington DC 20036		4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalgamated Transit Union COPE 5025 Wisconsin Avenue NW Washington DC 20016		5/2/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Bankers Asso. 1120 Connecticut Avenue NW Washington DC 20036		4/1/96	\$1,800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,800.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Collectors Asso. PAC 4040 West 70th Street Minneapolis MN 55436		4/26/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Internation Group PAC 1455 Pennsylvania Avenue NW Washington DC 20004		4/26/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Society of Travel Agts 1101 King Street, Ste. 200 Alexandria NY 22314		4/1/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 7  
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AT&T PAC 32 Avenue of the Americas New York NY 10013		5/7/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATLA PAC 1050 31st Street NW Washington DC 20007		6/10/96 5/20/96	\$2,000.00 \$2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Canandaigua Wine Co. Inc. PAC 116 Buffalo Street Canandaigua NY 14424		4/18/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CBANYS PAC P Box 325 Grand Central Station NY 10163		4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Civic Action Fund Loral Corp. 1210 Massillon Road Akron OH 44315		4/26/96	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Coast FEDPAC 18000 Chatsworth Street Granada Hills CA 91344		6/20/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CSX Good Government Fund PAC PO Box C32222 Richmond VA 23261		4/15/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

7250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 7  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DRIVE PAC 25 Louisiana Avenue NW Washington DC 20001	Occupation	6/5/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code Drive Political Fund PAC 25 Louisiana Avenue NW Washington DC 20001	Name of Employer	6/18/96	\$2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,500.00	
C. Full Name, Mailing Address and ZIP Code First Chicago Corporation PAC One First National Plaza Chicago IL 60670	Name of Employer	4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Ford Motor Co. PAC The American Road Dearborn MI 48121	Name of Employer	4/15/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Goldman Sachs Partners PAC 1101 Penn Avenue Ste.900 Washington NY 20004	Name of Employer	4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code HF Ahmanson and Co. PAC 591 Redwood Highway No 4000 Mill Valley CA 94941	Name of Employer	6/18/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code House PAC 2700 Sanders Road Prospect Heights IL 60070	Name of Employer	4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 7  
FOR LINE NUMBER 11c

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

NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kirkpatrick and Lockhart PAC 535 Smithfield Street Pittsburgh PA 15222		6/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laborers Political League 905 Sixteenth Street NW Washington DC 20006		6/20/96 6/20/96 4/10/96	\$1,000.00 \$1,000.00 \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$4,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Local 138 PAC PO Box 206 Farmingdale NY 11735		6/20/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Metropolitan Life Ins. Co PAC One Madison Avenue New York NY 10010		4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morgan Stanley & Co. PAC 801 Pennsylvania Avenue NW Washington DC 20004		4/26/96 4/10/96	\$1,000.00 \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NATCA PAC 1150 17th Street NW Washington DC 20036		4/15/96	\$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$1,400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Beer Wholesalers Asso. 1100 S. Washington Street Alexandria VA 22314		4/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$	\$500.00	

SUBTOTAL of Receipts This Page (optional)

7900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 17  
FOR LINE NUMBER 11c

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

NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National PAC Federal 600 Pennsylvania Ave. SE Washington DC 20003		5/24/96	\$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
New York Mercantile Exchange 4 World Trade Center Ste.744 New York NY 10048		4/10/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NY Asso. of Mortgage Bankers 70 Grand Avenue Massapequa NY 11758		5/23/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PIA PAC 400 North Washington Street Alexandria VA 22314		4/1/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Political Educational Fund 815 16th Street NW Washington DC 20006		6/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors PAC 430 North Michigan Avenue Chicago IL 60611		4/26/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seafarers Political Activity 5201 Auth Way Camp Springs MD 20746		6/7/96	\$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional)

10,250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 6 OF 7  
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

PETE KING FOR CONGRESS COMMITTEE

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Sheet Metal Workers PAC 1750 New York Avenue NW Washington DC 20006</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 6/20/96</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>B. Full Name, Mailing Address and ZIP Code</b> SMAC PAC PO Box 221230 Chantilly VA 22022-1230</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 6/18/96</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Steamfitters Local 638 PAC 32-32 48th Avenue Long Island City NY 11101</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 4/15/96</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 250.00</p>		
<p><b>D. Full Name, Mailing Address and ZIP Code</b> The Travelers Group Inc. 65 East 55th Street New York NY 10022</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 4/18/96</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>		
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Transport Workers Union PAC 80 West End Avenue New York NY 10023</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 6/18/96</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>F. Full Name, Mailing Address and ZIP Code</b> U.A. Political Education Comm. 901 Massachusetts Avenue NW Washington DC 20001</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 6/20/96</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>G. Full Name, Mailing Address and ZIP Code</b> United Food &amp; Aomm. Workers PAC 1775 K Street NW Washington DC 20006-1598</p>	<p>Name of Employer  Occupation</p>	<p>Date (month, day, year) 6/18/96</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		

SUBTOTAL of Receipts This Page (optional) ..... \$250.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 7  
FOR LINE NUMBER 112

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NAME OF COMMITTEE (in Full)

PETE KING FOR CONGRESS COMMITTEE

<b>A. Full Name, Mailing Address and ZIP Code</b> Young Jewish Leadership PAC 240 East 27th Street Rm 20C New York NY 10016	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	4/1/96	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

41700.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)  
**PETE KING FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Washington, D.C.	postage	4/1/96	64.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/7/96	250.00
	<input type="checkbox"/> Other (specify)	5/13/96	192.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/29/96	96.00
	<input type="checkbox"/> Other (specify)	6/16/96 6/20/96	96.00 160.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/26/96	160.00
	<input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	ad. subscription	4/9/96	342.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	4/16/96	28.95
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	ad	4/9/96	300.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	printing	4/9/96	493.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/8/96	323.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	miscellaneous	4/11/96	200.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	+V ad	4/15/96	1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	tickets for fund raiser and plane tickets to convention	5/2/96	300.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/23/96 5/29/96	618.00 105.00

SUBTOTAL of Disbursements This Page (optional) .....	4727.95
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

**PETE KING FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dole for President Committee 810 FIRST ST. NE Washington, D.C. 20013	Reimbursement for floret tape Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/2/96 6/21/96 6/27/96	205.00 165.00 115.80
Eliuk Jorge 111 Ampellicine. N. Bellmore, N.Y.	Reimbursement for postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/8/96	12.82
Nolan Enterprises 98 Wilson St. E. Rockaway N.Y. 11518	Bumper stickers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/96	821.93
John McLaughlin Assoc. 601 Madison St. Alexandria, Va. 22314	poll Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/96	10,200.00
Ancient Order of Hibernians 38 Bayview Terrace Northasset, N.Y. 11080	Journal Ad Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/96	150.00
Marsell Group 459 Westbury Ave. Westbury, N.Y. Carle Place N.Y. 11514	Printing: Fund raiser newsletters Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/96	132.37
Peter King 1442 Beth Road Seaford N.Y. 11753	Reimbursement: tolls, taxis, parking Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/17/96 6/21/96	91.24 118.00
Robert O'Connor 2515 K St. NW Washington D.C. 20037	Campaign consultant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/96	2500.00
Ben Harbor Frame Shop 1011 Park Blvd. Massapequa Park, N.Y. 11762	frames for photos Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/96 6/11/96	271.25 271.25

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

15 057.68

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete King for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hesperia University Club Albany, N.Y. 11550	Campaign breakfast Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/29/96	773.43
Jewish World 115 Middle Neck Road Great Neck, N.Y. 11021	Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/24/96 5/20/96	288.00 288.00
Nassau Conservative Committee 36 Sunrise St. Plainville N.Y. 11803	Ads, tickets, petition printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/24/96 4/25/96 6/4/96	150.00 350.00 125.00
Ken Smith Congressional Printer W406 Rayburn Bldg. Washington, D.C. 20515	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/16/96 5/1/96	40.00 105.25
Chemical Bank P.O. Box 8507 Hicksville, N.Y. 11802	Printing, meals, etc. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/6/96 5/23/96	60.00 81.00
Chemical Bank P.O. Box 8507 Hicksville, N.Y. 11802	parking, photos, printing, meals, red bp. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/96	514.39
Bull feathers Restaurant 1st Street SE Washington, D.C.	Campaign meal Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/14	215.22 memo
Quicks Photo 1877 Bellmore Ave. Bellmore N.Y. 11710	photo developing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/96 3/9/96 3/17/96 3/24/96	34.42 memo 34.42 memo 37.91 memo 9.57 memo
		2/1/96 2/5/96 2/27/96 3/24/96	3

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

2775.57

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
*Rate King for Congress Committee*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Chase Credit Card Services P.O. Box 8507 Hackensack, N.J. 11802</i>	<i>photos, hotel room, meals, phone</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/13/96</i>	<i>834.88</i>
<i>Quicks Photo 1877 Bellmore Ave Bellmore, N.J. 11710</i>	<i>photo developing</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/4/96 4/12/96 4/5/96</i>	<i>39.01 memo 146.12 memo 52.01 memo</i>
<i>C. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/5/96</i>	<i>11.12 memo</i>
<i>D. Full Name, Mailing Address and ZIP Code Morris Inn University of Notre Dame South Bend, Indiana</i>	<i>hotel room, meals and miscellaneous</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>4/3/96 4/3/96 4/3/96</i>	<i>10.20 memo 77.70 memo 158.40 memo</i>
<i>E. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<i>F. Full Name, Mailing Address and ZIP Code Credit Card Services P.O. Box 15904 Wilmington, Del. 19886</i>	<i>bus, photos, meals, parking</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/14/96</i>	<i>362.55</i>
<i>G. Full Name, Mailing Address and ZIP Code Quicks Photo 1877 Bellmore Ave Bellmore, N.J. 11710</i>	<i>photo developing</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/18/96 5/14/96 4/27/96</i>	<i>55.38 memo 19.15 memo 9.90 memo</i>
<i>H. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<i>I. Full Name, Mailing Address and ZIP Code</i>	<i>Purpose of Disbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....	<i>1197.43</i>
TOTAL This Period (last page this line number only) .....	<i>23758.63</i>

