

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Pete King For Congress Committee

ADDRESS (number and street) PO Box 1428  
 Check if different than previously reported. (ACC)  
Seaford NY 11783 0257

2. **FEC IDENTIFICATION NUMBER** C00272211  
**CITY** **STATE** **ZIP CODE**  
3. **IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)  
**STATE** **DISTRICT**  
NY 03

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 01 01 2007 through 03 31 2007

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 Anne Rosenfeld

Signature of Treasurer Electronically Filed by Anne Rosenfeld Date 12 11 2008

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Pete King For Congress Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	87771.18	95886.18
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87771.18	95886.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	115147.60	166816.54
(b) Total Offsets to Operating Expenditures (from Line 14).....	11434.07	11434.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	103713.53	155382.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	144000.37	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
Pete King For Congress Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

44250.00

50100.00

(ii) Unitemized.....

22521.18

23786.18

(iii) TOTAL of contributions

66771.18

73886.18

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

21000.00

22000.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

87771.18

95886.18

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

11434.07

11434.07

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

99205.25

107320.25

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	115147.60	166816.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	620.00	820.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	115767.60	167636.54

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	160562.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	99205.25
25. SUBTOTAL (add Line 23 and Line 24).....	259767.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	115767.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	144000.37

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

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

FOR LINE NUMBER: PAGE 5 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mohammed Rahman

Mailing Address 8671 106th Street

City Richmond Hill State NY Zip Code 11418-1603

FEC ID number of contributing federal political committee. C

Name of Employer information requested Occupation information requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 01 / 08 / 2007

**Transaction ID:** A-C12825

Amount of Each Receipt this Period 400.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mohiuddin Dewan

Mailing Address 4027 62nd Street

City Woodside State NY Zip Code 11377-4962

FEC ID number of contributing federal political committee. C

Name of Employer Biorrdi Corp. Occupation Vice President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 01 / 18 / 2007

**Transaction ID:** A-C12828

Amount of Each Receipt this Period 300.00

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

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

Mailing Address 6117 Woodside Avenue Apt. 5E

City Woodside State NY Zip Code 11377-3525

FEC ID number of contributing federal political committee. C

Name of Employer Royal Health Care Occupation Outreach Coordinator

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 01 / 18 / 2007

**Transaction ID:** A-C12824

Amount of Each Receipt this Period 700.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 66

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Bari Mohammed

Mailing Address PO Box 701404

City State Zip Code  
East Elmhurst NY 11370-3404

FEC ID number of contributing federal political committee. C

Name of Employer information requested Occupation information requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 7

**Transaction ID:** A-C12827

Amount of Each Receipt this Period 600.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Michael Ashner

Mailing Address 101 Cove Neck Road

City State Zip Code  
Oyster Bay NY 11771-1822

FEC ID number of contributing federal political committee. C

Name of Employer Winthrop Financial Associate Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

**Transaction ID:** A-C12231

Amount of Each Receipt this Period 1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John Bergaglio

Mailing Address 56 W Main Street

City State Zip Code  
Kings Park NY 11754-1606

FEC ID number of contributing federal political committee. C

Name of Employer Smart Vent Occupation Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

**Transaction ID:** A-C12228

Amount of Each Receipt this Period 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 2600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold Boening

Mailing Address 91 Fairfax Road

City State Zip Code  
Massapequa NY 11758-8151

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

Name of Employer Boening Brothers Occupation Wholesale Distributor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

**Transaction ID:** A-C12235

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joe Cassidy

Mailing Address 24 Pell Terrace

City State Zip Code  
Garden City NY 11530-1911

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

Name of Employer Self Occupation Labor Arbitrator

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

**Transaction ID:** A-C12227

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 80 Kingsbury Road

City State Zip Code  
Garden City NY 11530-3138

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

Name of Employer housewife Occupation housewife

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 0 7

**Transaction ID:** A-C12232

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Larry Elovich, Esq.  
Mailing Address 164 W Park Avenue  
City Long Beach State NY Zip Code 11561-3317  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Attorney  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
1000.00

Date of Receipt MM / DD / YYYY  
02 / 28 / 2007  
**Transaction ID:** A-C12233  
Amount of Each Receipt this Period  
1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Lou Furino  
Mailing Address 364 Heritage Hills Unit B  
City Somers State NY Zip Code 10589-1748  
FEC ID number of contributing federal political committee. C  
Name of Employer retired Occupation retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
250.00

Date of Receipt MM / DD / YYYY  
02 / 28 / 2007  
**Transaction ID:** A-C12230  
Amount of Each Receipt this Period  
250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Gill, Esq.  
Mailing Address 1290 Avenue Of The Americas  
City New York State NY Zip Code 10104-0101  
FEC ID number of contributing federal political committee. C  
Name of Employer Bryan Cave LLP Occupation attorney  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
1000.00

Date of Receipt MM / DD / YYYY  
02 / 28 / 2007  
**Transaction ID:** A-C12236  
Amount of Each Receipt this Period  
1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2250.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 66

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Benjamin Klemanowicz, Esq.

Mailing Address 100 Hilton Avenue  
Unit 610

City State Zip Code  
Garden City NY 11530-1568

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation  
Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 28 / 2007

**Transaction ID:** A-C12234

Amount of Each Receipt this Period  
1000.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Robert Blickey

Mailing Address 1805 Grant Avenue

City State Zip Code  
Seaford NY 11783-2318

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation  
retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2007

**Transaction ID:** A-C12410

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. F. A Curran

Mailing Address 40 Lawrence Lane

City State Zip Code  
Bay Shore NY 11706-8626

FEC ID number of contributing federal political committee. C

Name of Employer Royal Products Occupation  
VP

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 06 / 2007

**Transaction ID:** A-C12412

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. J. Robert Dailey

Mailing Address 13 Stone Hill Drive N

City State Zip Code  
Manhasset NY 11030-4439

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

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 06 / 2007

**Transaction ID:** A-C12407

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gregory DeRosa

Mailing Address PO Box 8

City State Zip Code  
Old Bethpage NY 11804-0008

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

Name of Employer Occupation  
Custom Clay President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 06 / 2007

**Transaction ID:** A-C12400

Amount of Each Receipt this Period  
2300.00

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

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

Mailing Address PO Box 8

City State Zip Code  
Old Bethpage NY 11804-0008

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

Name of Employer Occupation  
Custom Clay President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 06 / 2007

**Transaction ID:** A-C12401

Amount of Each Receipt this Period  
200.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Sandy Goldfarb		Date of Receipt
	Mailing Address 22 Grace Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Old Westbury	NY	11568-1221
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12402
Name of Employer Self		Occupation	Amount of Each Receipt this Period
Commodities Trader			<input type="text"/> 1000.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 1000.00	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Frederic Gould		Date of Receipt
	Mailing Address 60 Cuttermill Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Great Neck	NY	11021-3104
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12408
Name of Employer Gould Investors, LP		Occupation	Amount of Each Receipt this Period
Real Estate Developer			<input type="text"/> 500.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 500.00	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs. Barbara Iannuzzi		Date of Receipt
	Mailing Address 336 Bay Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2007
	City	State	Zip Code
	Massapequa	NY	11758-8144
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12413
Name of Employer homemaker		Occupation	Amount of Each Receipt this Period
homemaker			<input type="text"/> 1000.00
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 1000.00	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David John		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 2890 Kinloch Road		<b>Transaction ID:</b> A-C12376
	City Wantagh	State NY	Zip Code 11793-1714
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Meenan Oil Company	Occupation Service Technician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. & Mrs. Charlie Milone		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 1270 Allen Drive		<b>Transaction ID:</b> A-C12399
	City Seaford	State NY	Zip Code 11783-1703
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Town of Hempstead	Occupation Deputy Commissioner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Peter Pinto		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address CS 9018		<b>Transaction ID:</b> A-C12405
	City Melville	State NY	Zip Code 11747
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Oxford Management Services	Occupation Vice President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Richard Pinto		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 199 Montecito Crescent		<b>Transaction ID:</b> A-C12403
	City Melville	State NY	Zip Code 11747-5231
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
	Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth Quagenti		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 51 Miller Road		<b>Transaction ID:</b> A-C12520
	City Farmingdale	State NY	Zip Code 11735-2040
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
	Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gabriel Scibelli		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
	Mailing Address 33 Acorn Ponds Drive		<b>Transaction ID:</b> A-C12414
	City Roslyn	State NY	Zip Code 11576-2817
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Customs House Broker	Occupation Overton	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 66  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial) Mr. Joseph Spinelli		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
Mailing Address 1 Rockefeller Plaza Floor 18		<b>Transaction ID:</b> A-C12411
City State Zip Code New York NY 10020-2133	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer Daylight Forensic	Occupation Principal	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Mrs. Martha Thompson		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
Mailing Address 3854 Hudson Avenue		<b>Transaction ID:</b> A-C12409
City State Zip Code Seaford NY 11783-2322	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Douglas Warner, III		Date of Receipt MM / DD / YYYY 03 / 06 / 2007
Mailing Address 520 Chicken Valley Road		<b>Transaction ID:</b> A-C12406
City State Zip Code Locust Valley NY 11560-2613	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mario Biaggi

Mailing Address 3333 Henry Hudson Parkway  
Apt. 9J

City State Zip Code  
Bronx NY 10463-3255

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

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12661

Amount of Each Receipt this Period  
250.00

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

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

Mailing Address 5 Barkers Point Road

City State Zip Code  
Sands Point NY 11050-1107

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

Name of Employer Occupation  
Merrill Lynch Broker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12655

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 62 Roosevelt Avenue

City State Zip Code  
Massapequa Park NY 11762-2631

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

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12659

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Daniel Donovan

Mailing Address 1 Sydney Street

City State Zip Code  
Plainview NY 11803-3012

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

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12653

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 31 Great Oaks Road

City State Zip Code  
Roslyn Heights NY 11577-1604

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

Name of Employer Occupation  
Self Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12656

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 310 W 86th Street  
Apt. 11C

City State Zip Code  
New York NY 10024-3142

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

Name of Employer Occupation  
US Dept Health & Human Services Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A-C12664

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 66  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Honorable Joseph Margiotta, Esq.

Mailing Address 425 Broadhollow Road  
Suite 400

City State Zip Code  
Melville NY 11747-4701

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

Name of Employer Self Occupation  
Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2007

Transaction ID: A-C12658

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Gary Melius

Mailing Address 135 W Gate Drive

City State Zip Code  
Huntington NY 11743-6052

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

Name of Employer Oheka Management Corp. Occupation  
President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2007

Transaction ID: A-C12652

Amount of Each Receipt this Period  
1000.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Isaac Moradi

Mailing Address 9301 Wilshire Boulevard  
Suite 315

City State Zip Code  
Beverly Hills CA 90210-6132

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

Name of Employer Self Occupation  
Investor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 09 / 2007

Transaction ID: A-C12660

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Ellen Murray		Date of Receipt
	Mailing Address 114 Cedarhurst Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 09 / 2007
	City	State	Zip Code
	Point Lookout	NY	11569
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C12662
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Antonio Patino		Date of Receipt
	Mailing Address 2136 Seamans Neck Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 09 / 2007
	City	State	Zip Code
	Seaford	NY	11783-2539
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C12657
Name of Employer Joint Board 18		Occupation Union Representative	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr. Lawrence Ravich		Date of Receipt
	Mailing Address 27110 Grand Central Parkway Apt. 26N		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 09 / 2007
	City	State	Zip Code
	Floral Park	NY	11005-1226
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C12651
Name of Employer Executive Director		Occupation St. James Healthcare Company	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 66

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Bruce Cohen

Mailing Address 13303 Wildcrest Drive

City State Zip Code  
Los Altos Hills CA 94022-3431

FEC ID number of contributing federal political committee. C

Name of Employer  
Cellerant Therapeutics, Inc.

Occupation  
President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
03 / 20 / 2007

**Transaction ID:** A-C12758

Amount of Each Receipt this Period  
250.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Forchelli, Esq.

Mailing Address 330 Old Country Road  
Suite 301

City State Zip Code  
Mineola NY 11501-4143

FEC ID number of contributing federal political committee. C

Name of Employer  
Forchelli, Curto, Schwartz, Mineo, Car

Occupation  
Managing Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
03 / 20 / 2007

**Transaction ID:** A-C12762

Amount of Each Receipt this Period  
500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Donald Keogh

Mailing Address 200 Galleria Parkway SE  
Suite 970

City State Zip Code  
Atlanta GA 30339-5945

FEC ID number of contributing federal political committee. C

Name of Employer  
Allen & Company

Occupation  
Investment Banking

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
03 / 20 / 2007

**Transaction ID:** A-C12752

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald Sorenson

Mailing Address 142A Van Cortlandt Park

City State Zip Code  
Bronx NY 10463-2505

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

Name of Employer Occupation  
retired retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 20 / 2007

**Transaction ID:** A-C12764

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Philip Bechtel

Mailing Address 4700 Dover Road

City State Zip Code  
Bethesda MD 20816-1775

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

Name of Employer Occupation  
FHL Bank Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12808

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 138 N Jackson Street

City State Zip Code  
Arlington VA 22201-1244

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

Name of Employer Occupation  
Matz, Blacato & Associates President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12818

Amount of Each Receipt this Period  
250.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Susan Brophy

Mailing Address 2801 27th Street N

City Arlington State VA Zip Code 22207-4921

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

Name of Employer AOL Time Warner Occupation Senior Vice President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2007  
**Transaction ID: A-C12812**  
 Amount of Each Receipt this Period 500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Martin Hamberger, Esq.

Mailing Address 22601 Davis Drive

City Sterling State VA Zip Code 20164-4471

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

Name of Employer Martin Hamberger & Associates Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2007  
**Transaction ID: A-C12803**  
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 7850 Southdown Road

City Alexandria State VA Zip Code 22308-1342

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

Name of Employer Hauer Group Occupation CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2007  
**Transaction ID: A-C12816**  
 Amount of Each Receipt this Period 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 66  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. James Hynes

Mailing Address 117 Meadow Road

City Riverside State CT Zip Code 06878-2521

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

Name of Employer Self Occupation Private Investor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 29 / 2007

Transaction ID: A-C12798

Amount of Each Receipt this Period: 500.00

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

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer Jarrell

Mailing Address 2111 Wilson Boulevard Suite 600

City Arlington State VA Zip Code 22201-3051

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

Name of Employer washington strategy group Occupation partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 29 / 2007

Transaction ID: A-C12821

Amount of Each Receipt this Period: 500.00

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

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Oliver Kellman

Mailing Address 910 17th Street Suite 800

City Washington State DC Zip Code 20006-2606

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

Name of Employer Oliver Kellman Worldwide Occupation Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 29 / 2007

Transaction ID: A-C12795

Amount of Each Receipt this Period: 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
S. Robert Kroll, Esq.  
Mailing Address 2077 Illona Lane  
City Merrick State NY Zip Code 11566-5428  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 03 / 29 / 2007  
Transaction ID: A-C12788  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. & Mrs. Brendan Lavelle  
Mailing Address 27 Sherry Hill Lane  
City Manhasset State NY Zip Code 11030-3220  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Broker  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 03 / 29 / 2007  
Transaction ID: A-C12789  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Adam Levine  
Mailing Address 2038 18th Street NW Penthouse 4  
City Washington State DC Zip Code 20009-1867  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Public Stragies Occupation Managing Director  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 03 / 29 / 2007  
Transaction ID: A-C12807  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 66  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harry Malhotra

Mailing Address 21 Holman Boulevard

City State Zip Code  
Hicksville NY 11801-2849

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

Name of Employer Occupation  
E Wireless President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12790

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph Mondello

Mailing Address 2707 S Grove Street

City State Zip Code  
Arlington VA 22202-2423

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

Name of Employer Occupation  
Loeffler, Jones Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12806

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 5805 32nd Street NW

City State Zip Code  
Washington DC 20015-1640

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

Name of Employer Occupation  
Van Scoyoc Associate VP

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12819

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 66  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Eugene Patrone, III

Mailing Address 4721 Washington Boulevard

City State Zip Code  
Arlington VA 22205-2540

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

Name of Employer Washington Group Occupation Associate

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12820

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence Peduzzi

Mailing Address 1600 23rd Street S

City State Zip Code  
Arlington VA 22202-1525

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

Name of Employer Peduzzi Associates Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12811

Amount of Each Receipt this Period  
500.00

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

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

Mailing Address 147 Biltmore Boulevard

City State Zip Code  
Massapequa NY 11758-7244

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

Name of Employer White & Re Agency Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 29 / 2007

**Transaction ID:** A-C12766

Amount of Each Receipt this Period  
500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bob Royer, Esq.		Date of Receipt
	Mailing Address 925 15th Street NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Washington	DC	20005-2305
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12809
Name of Employer Royer & Brooks		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. & Mrs. John Sharkey		Date of Receipt
	Mailing Address 62 Woodhail Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Lido Beach	NY	11561-5116
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12765
Name of Employer Kane, Sanders & Smart		Occupation CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gary Slavin		Date of Receipt
	Mailing Address 63 Sunset Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Massapequa	NY	11758-7541
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12761
Name of Employer Prudential		Occupation Financial Advisor	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Carol Stahl	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 2424 Queen Palm Road	<b>Transaction ID:</b> A-C12787
	City State Zip Code Boca Raton FL 33432-7934	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer consultant Occupation self employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Dennis Vierra	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 21 N Greenbrier Street	<b>Transaction ID:</b> A-C12813
	City State Zip Code Arlington VA 22203-1230	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Vierra Associates, Inc. Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Rian Wren	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 1087 Oak Street	<b>Transaction ID:</b> A-C12799
	City State Zip Code Winnetka IL 60093-2164	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Neutral Tanden Occupation CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Jonathan Zetts		Date of Receipt
	Mailing Address 1138 Gaither Road		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Rockville	MD	20850-6676
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12822
Name of Employer information requested		Occupation information requested	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Albert Alimena		Date of Receipt
	Mailing Address 825 E Gate Boulevard Suite 102		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Garden City	NY	11530-2136
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12835
Name of Employer Dickinson Group		Occupation Associate	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. M. James Littig		Date of Receipt
	Mailing Address 11813 Oakwood Drive		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Woodbridge	VA	22192-1303
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A-C12841
Name of Employer Congressional Strategies		Occupation Associate	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1250.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 29 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bartley O'Hara

Mailing Address 3400 Mckinley Street

City State Zip Code  
Washington DC 20015-2512

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

Name of Employer self Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	0	7

**Transaction ID:** A-C12842

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward Wenger

Mailing Address 20 Forest Drive

City State Zip Code  
Sands Point NY 11050-1923

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

Name of Employer retired Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	0	7

**Transaction ID:** A-C12838

Amount of Each Receipt this Period  
1000.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	44250.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
American Stock Exchange PAC  
Mailing Address 86 Trinity Place  
City New York State NY Zip Code 10006-1818  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 20 / 2007  
Transaction ID: A-C12757  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
International Longshore & Warehouse Union Politi  
Mailing Address 1188 Franklin Street  
City San Francisco State CA Zip Code 94109-6800  
FEC ID number of contributing federal political committee. **C** C00176214  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 20 / 2007  
Transaction ID: A-C12760  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Massachusetts Mutual Life Insurance Co. PAC  
Mailing Address 1295 State Street  
City Springfield State MA Zip Code 01111-0001  
FEC ID number of contributing federal political committee. **C** C00118943  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 03 / 20 / 2007  
Transaction ID: A-C12763  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 66
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Quest PAC	Date of Receipt MM / DD / YYYY 03 / 20 / 2007
	Mailing Address 815 Connecticut Avenue NW Suite 330	<b>Transaction ID:</b> A-C12759
	City Washington State DC Zip Code 20006-4038	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00329185	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) American Association For Justice PAC	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 1050 31st Street	<b>Transaction ID:</b> A-C12805
	City Washington State DC Zip Code 20007-4405	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b> C00024521	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) American Hospital Association PAC	Date of Receipt MM / DD / YYYY 03 / 29 / 2007
	Mailing Address 325 7th Street Suite 700	<b>Transaction ID:</b> A-C12810
	City Washington State DC Zip Code 20004-2801	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00106146	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Avenue  
Suite 1100

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
03 / 29 / 2007

**Transaction ID:** A-C12802

Amount of Each Receipt this Period: 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
International Longshoremen's Association AFL-CIO C

Mailing Address 17 Battery Place  
Suite 930

City New York State NY Zip Code 10004-1122

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: MM / DD / YYYY  
03 / 29 / 2007

**Transaction ID:** A-C12815

Amount of Each Receipt this Period: 2500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Lent & Scrivner PAC

Mailing Address PO Box 2715

City Arlington State VA Zip Code 22202-0715

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
03 / 29 / 2007

**Transaction ID:** A-C12814

Amount of Each Receipt this Period: 1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Motorola, Inc. Political Action Committee

Mailing Address 1350 I Street  
Suite 400

City Washington State DC Zip Code 20005-7201

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12786  
 Amount of Each Receipt this Period: 2000.00

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

**B.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Avenue

City Washington State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12804  
 Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 113 S West Street  
Floor 4

City Alexandria State VA Zip Code 22314-2858

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12823  
 Amount of Each Receipt this Period: 1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 34 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Raytheon PAC

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City Arlington State VA Zip Code 22209-2270

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12801  
 Amount of Each Receipt this Period: 1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Sheet Metal Workers' International Association Pol

Mailing Address 1750 New York Avenue

City Washington State DC Zip Code 20006-5301

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12800  
 Amount of Each Receipt this Period: 1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Transportation Trades Dept. AFL-CIO PAC

Mailing Address 888 16th Street  
Suite 650

City Washington State DC Zip Code 20006-4103

FEC ID number of contributing federal political committee. **C** C00280909

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 29 / 2007  
**Transaction ID:** A-C12817  
 Amount of Each Receipt this Period: 500.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
UNISYS Corporation Employees PAC

Mailing Address One Unisys

City State Zip Code  
Blue Bell PA 19424-0001

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2007

**Transaction ID:** A-C12797

Amount of Each Receipt this Period  
1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
BAE Systems USA PAC

Mailing Address 1300 17th Street

City State Zip Code  
Arlington VA 22209-3811

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2007

**Transaction ID:** A-C12836

Amount of Each Receipt this Period  
1000.00

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

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

Mailing Address 1313 L Street

City State Zip Code  
Washington DC 20005-4110

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 30 / 2007

**Transaction ID:** A-C12834

Amount of Each Receipt this Period  
1000.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** This Period (last page this line number only) ..... ► **21000.00**

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

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

FOR LINE NUMBER: PAGE 36 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
Cablevision

Mailing Address 6 Corporate Drive

City State Zip Code  
Melville NY 11747

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
217.10

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 8 / 2 0 0 7

**Transaction ID: A-O57**

Amount of Each Receipt this Period  
217.10

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

**B.**

Full Name (Last, First, Middle Initial)  
McLaughlin and Associates

Mailing Address 919 Prince Street

City State Zip Code  
Alexandria VA 22314-3008

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
11126.97

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 8 / 2 0 0 7

**Transaction ID: A-O58**

Amount of Each Receipt this Period  
11126.97

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11344.07**

**TOTAL** This Period (last page this line number only) ..... ► **11344.07**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: B-E-2679 Date of Disbursement 01 / 11 / 2007
	Mailing Address 6 Corporate Drive	Amount of Each Disbursement this Period 49.15
	City Melville State NY Zip Code 11747	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: internet access Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) General Security	Transaction ID: B-E-2676 Date of Disbursement 01 / 11 / 2007
	Mailing Address PO Box 329	Amount of Each Disbursement this Period 214.75
	City Plainview State NY Zip Code 11803-0329	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: security Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B-E-2665 Date of Disbursement 01 / 11 / 2007
	Mailing Address PO Box 1100	Amount of Each Disbursement this Period 46.85
	City Albany State NY Zip Code 12250-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>310.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address PO Box 1100</p> <p>City Albany State NY Zip Code 12250-0001</p> <p>Purpose of Disbursement Other: telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2666</p> <p>Date of Disbursement 01 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 72.21</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 64268</p> <p>City Baltimore State MD Zip Code 21264-4268</p> <p>Purpose of Disbursement Other: cell phone charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2670</p> <p>Date of Disbursement 01 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 505.43</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Petty Cash</p> <p>Mailing Address PO Box 1428</p> <p>City Seaford State NY Zip Code 11783-0257</p> <p>Purpose of Disbursement Other: petty cash</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2684</p> <p>Date of Disbursement 01 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

977.64

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Edie Longo  Mailing Address 111 Ampel Avenue  City North Bellmore State NY Zip Code 11710-2759  Purpose of Disbursement Other: salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2687 Date of Disbursement 01 / 17 / 2007  Amount of Each Disbursement this Period 1500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Anne Rosenfeld  Mailing Address 94 Michigan Avenue  City Massapequa State NY Zip Code 11758-4932  Purpose of Disbursement Other: salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2686 Date of Disbursement 01 / 17 / 2007  Amount of Each Disbursement this Period 2500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) National Republican Congressional Committee  Mailing Address 320 1st Street  City Washington State DC Zip Code 20003-1838  Purpose of Disbursement Other: excess of campaign funds Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2688 Date of Disbursement 01 / 23 / 2007  Amount of Each Disbursement this Period 50000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	54000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
American Express Centurion Bank

Transaction ID: B-E-2726

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	7	

Mailing Address Suite  
2

Amount of Each Disbursement this Period

12718.95
----------

City State Zip Code  
Chicago IL 60679-0001

Purpose of Disbursement  
Other: credit card

Category/ Type
-------------------

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

Candidate Name

Original vendors exceeding reporting threshold itemized as memo transactions.

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
American Express Centurion Bank

Transaction ID: B-S-2741

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	7	

Mailing Address Suite  
2

Amount of Each Disbursement this Period

382.49
--------

City State Zip Code  
Chicago IL 60679-0001

Purpose of Disbursement  
Memo

Category/ Type
-------------------

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

Candidate Name

**[MEMO ITEM]**  
Subitemization of American Express Centurion Bank(01-/26/07)

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Bobby Van's Steak House

Transaction ID: B-S-2751

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	7	

Mailing Address 15th Street NW

Amount of Each Disbursement this Period

3596.48
---------

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Memo

Category/ Type
-------------------

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

Candidate Name

**[MEMO ITEM]**  
Subitemization of American Express Centurion Bank(01-/26/07)

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

12718.95
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Exxon Mobil  Mailing Address Jerusalem Avenue  City Seaford State NY Zip Code 11783  Purpose of Disbursement Memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-2742 Date of Disbursement 01 / 26 / 2007  Amount of Each Disbursement this Period 16.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
B.	Full Name (Last, First, Middle Initial) Fed Ex  Mailing Address PO Box 1140  City Memphis State TN Zip Code 38101-1140  Purpose of Disbursement Memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-S-2731 Date of Disbursement 01 / 26 / 2007  Amount of Each Disbursement this Period 9.06  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
C.	Full Name (Last, First, Middle Initial) Ford Motor Credit  Mailing Address PO Box 220564  City Pittsburgh State PA Zip Code 15257-2564  Purpose of Disbursement Other: car payment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-2692 Date of Disbursement 01 / 26 / 2007  Amount of Each Disbursement this Period 543.83  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>543.83</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Harbor Lights Electric Mailing Address 916 N Central Avenue City Massapequa State NY Zip Code 11758-2904 Purpose of Disbursement Other: outlet installation at HQ Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-E-2689 Date of Disbursement 01 / 26 / 2007
	Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Phoenix Park Hotel Mailing Address North Capitol Street City Washington State DC Zip Code 20005 Purpose of Disbursement Memo Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-S-2740 Date of Disbursement 01 / 26 / 2007
	Amount of Each Disbursement this Period 262.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
Subitemization of American Express Centurion Bank(01-/26/07)

<b>C.</b> Full Name (Last, First, Middle Initial) Senate Gift Shop Mailing Address Us Capitol City Washington State DC Zip Code 20510-0001 Purpose of Disbursement Memo Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-S-2752 Date of Disbursement 01 / 26 / 2007
	Amount of Each Disbursement this Period 242.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**[MEMO ITEM]**  
Subitemization of American Express Centurion Bank(01-/26/07)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Sidekicks  Mailing Address 1201 Park Boulevard  City Massapequa Park State NY Zip Code 11762 Purpose of Disbursement Memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-2745 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7  Amount of Each Disbursement this Period 269.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
B.	Full Name (Last, First, Middle Initial) Staples  Mailing Address Sunrise Highway  City Massapequa State NY Zip Code 11758 Purpose of Disbursement Memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-2743 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7  Amount of Each Disbursement this Period 961.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
C.	Full Name (Last, First, Middle Initial) US Air  Mailing Address Ronald Reagan National Airport  City Arlington State VA Zip Code 22201 Purpose of Disbursement Memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-S-2739 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 0 7  Amount of Each Disbursement this Period 301.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: B-S-2747 Date of Disbursement 01 / 26 / 2007
	Mailing Address West John Street	Amount of Each Disbursement this Period 1170.00
	City Hicksville State NY Zip Code 11801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: B-S-2748 Date of Disbursement 01 / 26 / 2007
	Mailing Address West John Street	Amount of Each Disbursement this Period 585.00
	City Hicksville State NY Zip Code 11801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: B-S-2749 Date of Disbursement 01 / 26 / 2007
	Mailing Address West John Street	Amount of Each Disbursement this Period 117.00
	City Hicksville State NY Zip Code 11801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Westy's Storage	Transaction ID: B-S-2746
	Mailing Address Route 110	Date of Disbursement 01 / 26 / 2007
	City Farmingdale State NY Zip Code 11735	Amount of Each Disbursement this Period 136.00
	Purpose of Disbursement Memo Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(01-/26/07)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) American Express Centurion Bank	Transaction ID: B-E-2756
	Mailing Address Suite 2	Date of Disbursement 02 / 01 / 2007
	City Chicago State IL Zip Code 60679-0001	Amount of Each Disbursement this Period 286.54
	Purpose of Disbursement Other: credit card Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Cablevision	Transaction ID: B-E-2697
	Mailing Address 6 Corporate Drive	Date of Disbursement 02 / 01 / 2007
	City Melville State NY Zip Code 11747	Amount of Each Disbursement this Period 48.64
	Purpose of Disbursement Other: internet access Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>335.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Costco

Mailing Address Route 110

City Melville State NY Zip Code 11747

Purpose of Disbursement

Memo

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2757

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

286.54

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

**[MEMO ITEM]**

Subitemization of American Express Centurion Bank(02-/01/07)

B.

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement

Other: telephone

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2637

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

36.08

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

C.

Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address PO Box 64268

City Baltimore State MD Zip Code 21264-4268

Purpose of Disbursement

Other: cell phone charges

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2671

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

286.72

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

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

322.80

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: B-E-2698 Date of Disbursement 02 / 01 / 2007
	Mailing Address PO Box 64268	Amount of Each Disbursement this Period 96.43
	City Baltimore State MD Zip Code 21264-4268	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: cell phone charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Worth Management	Transaction ID: B-E-2696 Date of Disbursement 02 / 01 / 2007
	Mailing Address 1180 Hempstead Turnpike	Amount of Each Disbursement this Period 1050.00
	City Uniondale State NY Zip Code 11553-1272	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: rent Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Worth Management	Transaction ID: B-E-2700 Date of Disbursement 02 / 01 / 2007
	Mailing Address 1180 Hempstead Turnpike	Amount of Each Disbursement this Period 12.30
	City Uniondale State NY Zip Code 11553-1272	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: electric for HQ Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1158.73</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Mr. David Andrukitis

Mailing Address 50 E Street

City Washington State DC Zip Code 20003-2620

Purpose of Disbursement  
Other: printing  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-2717  
Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

1184.93

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

B.

Full Name (Last, First, Middle Initial)  
Bar Harbour Gallery

Mailing Address 1011 Park Boulevard

City Massapequa Park State NY Zip Code 11762-2712

Purpose of Disbursement  
Other: framing  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-2703  
Date of Disbursement

02 / 09 / 2007

Amount of Each Disbursement this Period

512.70

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

C.

Full Name (Last, First, Middle Initial)  
Cablevision

Mailing Address 6 Corporate Drive

City Melville State NY Zip Code 11747

Purpose of Disbursement  
Other: internet access  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: B-E-2680  
Date of Disbursement

02 / 13 / 2007

Amount of Each Disbursement this Period

49.95

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

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

1747.58

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) First Impressions Mailing Address 320 Buffalo Avenue City Freeport State NY Zip Code 11520-4711 Purpose of Disbursement Other: printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2705 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 646.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) General Security Mailing Address PO Box 329 City Plainview State NY Zip Code 11803-0329 Purpose of Disbursement Other: security Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2677 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 2398.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>C.</b> Full Name (Last, First, Middle Initial) General Security Mailing Address PO Box 329 City Plainview State NY Zip Code 11803-0329 Purpose of Disbursement Other: security Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-2678 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
	Amount of Each Disbursement this Period 543.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3588.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address PO Box 1100  City Albany State NY Zip Code 12250-0001  Purpose of Disbursement Other: telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-2667 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7  Amount of Each Disbursement this Period 46.93  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Stan Swartz Associates  Mailing Address 9220 Rumsey Road  City Columbia State MD Zip Code 21045-1945  Purpose of Disbursement Other: security Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-2718 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 7  Amount of Each Disbursement this Period 3007.28  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) American Express Centurion Bank  Mailing Address Suite 2  City Chicago State IL Zip Code 60679-0001  Purpose of Disbursement Other: credit card Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-2758 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 7  Amount of Each Disbursement this Period 2392.49  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  Original vendors exceeding reporting threshold itemized as memo transactions.

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

**5446.70**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
American Express Centurion Bank

Mailing Address Suite 2

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement Memo

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2766

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

297.13

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

**[MEMO ITEM]**

Subitemization of American Express Centurion Bank(02-/20/07)

**B.** Full Name (Last, First, Middle Initial)  
Bobby Van's Steak House

Mailing Address 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Memo

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2762

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

194.35

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

**[MEMO ITEM]**

Subitemization of American Express Centurion Bank(02-/20/07)

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

Mailing Address 300 1st Street

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement Memo

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2761

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

12.98

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

**[MEMO ITEM]**

Subitemization of American Express Centurion Bank(02-/20/07)

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

0.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Exxon Mobil	Transaction ID: B-S-2760 Date of Disbursement 02 / 20 / 2007
	Mailing Address Jerusalem Avenue	Amount of Each Disbursement this Period 87.00
	City Seaford State NY Zip Code 11783	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of American Express Centurion Bank(02-/20/07)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Fed Ex	Transaction ID: B-S-2765 Date of Disbursement 02 / 20 / 2007
	Mailing Address PO Box 1140	Amount of Each Disbursement this Period 38.49
	City Memphis State TN Zip Code 38101-1140	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of American Express Centurion Bank(02-/20/07)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Lindenhurst Republican Club	Transaction ID: B-E-2707 Date of Disbursement 02 / 20 / 2007
	Mailing Address PO Box 395	Amount of Each Disbursement this Period 500.00
	City Lindenhurst State NY Zip Code 11757-0395	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: journal ad Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM] Subitemization of American Express Centurion Bank(02-/20/07)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

500.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Taget</p> <p>Mailing Address Hempstead Turnpike</p> <p>City Levittown State NY Zip Code 11756</p> <p>Purpose of Disbursement Memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-2770</p> <p>Date of Disbursement 02 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 281.32</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(02-/20/07)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address Merrick Road</p> <p>City Seaford State NY Zip Code 11783</p> <p>Purpose of Disbursement Memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-2768</p> <p>Date of Disbursement 02 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 780.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(02-/20/07)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) US Air</p> <p>Mailing Address Ronald Reagan National Airport</p> <p>City Arlington State VA Zip Code 22201</p> <p>Purpose of Disbursement Memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-S-2763</p> <p>Date of Disbursement 02 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(02-/20/07)</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>0.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Bar Harbour Gallery	Transaction ID: B-E-2704 Date of Disbursement 02 / 28 / 2007
	Mailing Address 1011 Park Boulevard	Amount of Each Disbursement this Period 754.87
	City Massapequa Park State NY Zip Code 11762-2712	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: framing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ford Motor Credit	Transaction ID: B-E-2693 Date of Disbursement 02 / 28 / 2007
	Mailing Address PO Box 220564	Amount of Each Disbursement this Period 543.83
	City Pittsburgh State PA Zip Code 15257-2564	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: car payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nordstrom Bank	Transaction ID: B-E-2724 Date of Disbursement 02 / 28 / 2007
	Mailing Address PO Box 79137	Amount of Each Disbursement this Period 1113.75
	City Phoenix State AZ Zip Code 85062-9137	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: credit card Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2412.45
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) US House of Representative	Transaction ID: B-S-2725 Date of Disbursement 02 / 28 / 2007
	Mailing Address Us Capitol	Amount of Each Disbursement this Period 1113.75
	City Washington State DC Zip Code 20515-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> Subitemization of Nordstrom Bank(02/28/07)
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B-E-2668 Date of Disbursement 02 / 28 / 2007
	Mailing Address PO Box 1100	Amount of Each Disbursement this Period 35.55
	City Albany State NY Zip Code 12250-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: telephone Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: B-E-2672 Date of Disbursement 02 / 28 / 2007
	Mailing Address PO Box 64268	Amount of Each Disbursement this Period 91.24
	City Baltimore State MD Zip Code 21264-4268	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Other: cell phone charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>126.79</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 64268 City Baltimore State MD Zip Code 21264-4268 Purpose of Disbursement Other: cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-E-2673 Date of Disbursement 02 / 28 / 2007
	Amount of Each Disbursement this Period 152.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Video Monitoring Service Mailing Address 330 W 42nd Street City New York State NY Zip Code 10036-6902 Purpose of Disbursement Other: video Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-E-2708 Date of Disbursement 02 / 28 / 2007
	Amount of Each Disbursement this Period 169.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) internal revenue service Mailing Address RR 2 City Ogden State UT Zip Code 84201-0001 Purpose of Disbursement Other: taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: B-E-2711 Date of Disbursement 03 / 01 / 2007
	Amount of Each Disbursement this Period 2341.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2662.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
The Congressional Club

Mailing Address 2001 New Hampshire Avenue

City Washington State DC Zip Code 20009-3414

Purpose of Disbursement  
Other: tickets

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2712  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

B.

Full Name (Last, First, Middle Initial)  
Mr. Michael Burton

Mailing Address 1526 17th Street Apt. 101

City Washington State DC Zip Code 20036-6214

Purpose of Disbursement  
Other: salary

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2720  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

C.

Full Name (Last, First, Middle Initial)  
Cablevision

Mailing Address 6 Corporate Drive

City Melville State NY Zip Code 11747

Purpose of Disbursement  
Other: installation and service

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2681  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Cannon Financial Services

Transaction ID: B-E-2721  
Date of Disbursement

Mailing Address PO Box 4004

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	7	

City Carol Stream State IL Zip Code 60197-4004

Amount of Each Disbursement this Period

1026.88
---------

Purpose of Disbursement  
Other: equipment lease

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
LIPA

Transaction ID: B-E-2714  
Date of Disbursement

Mailing Address Old Country Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	7	

City Hicksville State NY Zip Code 11801

Amount of Each Disbursement this Period

103.53
--------

Purpose of Disbursement  
Other: electric

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
The Congressional Institute

Transaction ID: B-E-2716  
Date of Disbursement

Mailing Address 401 Wythe Street # 103

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	7	

City Alexandria State VA Zip Code 22314-1915

Amount of Each Disbursement this Period

1556.00
---------

Purpose of Disbursement  
Other: retreat

Category/ Type
-------------------

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

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

2686.41

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address PO Box 1100

City Albany State NY Zip Code 12250-0001

Purpose of Disbursement  
Other: telephone

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2669  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	7	

Amount of Each Disbursement this Period

46.90
-------

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

B.

Full Name (Last, First, Middle Initial)  
American Express Centurion Bank

Mailing Address Suite 2

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Other: credit card

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-E-2771  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	7	

Amount of Each Disbursement this Period

2256.03
---------

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

Original vendors exceeding reporting threshold itemized as memo transactions.

C.

Full Name (Last, First, Middle Initial)  
American Express Centurion Bank

Mailing Address Suite 2

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement  
Memo

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2772  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	7	

Amount of Each Disbursement this Period

80.86
-------

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

**[MEMO ITEM]**

Subitemization of American Express Centurion Bank(03-/26/07)

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

2302.93
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TOTAL This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: B-S-2783 Date of Disbursement 03 / 26 / 2007
	Mailing Address Union Station	Amount of Each Disbursement this Period 260.00
	City Washington State DC Zip Code 20005	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	<b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(03-/26/07)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Capitol Hill Club	Transaction ID: B-S-2775 Date of Disbursement 03 / 26 / 2007
	Mailing Address 300 1st Street	Amount of Each Disbursement this Period 400.96
	City Washington State DC Zip Code 20003-1801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	<b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(03-/26/07)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Exxon Mobil	Transaction ID: B-S-2774 Date of Disbursement 03 / 26 / 2007
	Mailing Address Jerusalem Avenue	Amount of Each Disbursement this Period 119.70
	City Seaford State NY Zip Code 11783	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Memo Candidate Name	<b>[MEMO ITEM]</b> Subitemization of American Express Centurion Bank(03-/26/07)
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

A.

Full Name (Last, First, Middle Initial)

Exxon Mobil

Mailing Address Jerusalem Avenue

City State Zip Code  
Seaford NY 11783

Purpose of Disbursement

Memo

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2780

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

25.90

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

[MEMO ITEM]

Subitemization of American Express Centurion Bank(03-/26/07)

B.

Full Name (Last, First, Middle Initial)

US Air

Mailing Address Ronald Reagan National Airport

City State Zip Code  
Arlington VA 22201

Purpose of Disbursement

Memo

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2776

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

188.80

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

[MEMO ITEM]

Subitemization of American Express Centurion Bank(03-/26/07)

C.

Full Name (Last, First, Middle Initial)

Value Web

Mailing Address 3250 W Commercial Boulevard

City State Zip Code  
Ft Lauderdale FL 33309-3404

Purpose of Disbursement

Memo

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: B-S-2788

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

479.40

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

[MEMO ITEM]

Subitemization of American Express Centurion Bank(03-/26/07)

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

0.00

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



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) First Impressions</p> <p>Mailing Address 320 Buffalo Avenue</p> <p>City Freeport State NY Zip Code 11520-4711</p> <p>Purpose of Disbursement Other: web site design</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2706</p> <p>Date of Disbursement 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 11541.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ford Motor Credit</p> <p>Mailing Address PO Box 220564</p> <p>City Pittsburgh State PA Zip Code 15257-2564</p> <p>Purpose of Disbursement Other: car payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2694</p> <p>Date of Disbursement 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 543.62</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) UFCW Local 1500 Scholarship Fund</p> <p>Mailing Address 22110 Jamaica Avenue</p> <p>City Queens Village State NY Zip Code 11428-2037</p> <p>Purpose of Disbursement Other: donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-2723</p> <p>Date of Disbursement 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

12485.03

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 64268 City Baltimore State MD Zip Code 21264-4268 Purpose of Disbursement Other: cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-2674 Date of Disbursement 03 / 27 / 2007
	Amount of Each Disbursement this Period 91.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 64268 City Baltimore State MD Zip Code 21264-4268 Purpose of Disbursement Other: cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-2675 Date of Disbursement 03 / 27 / 2007
	Amount of Each Disbursement this Period 161.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

252.57

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

114219.30

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Pete King For Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Suffolk County Conservative Chairmans Club

Mailing Address PO Box 100

City Bayport State NY Zip Code 11705-0100

Purpose of Disbursement  
Charitable Donation: ticket

Candidate Name

012  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: B-E-2719  
Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Nassau County Republican Committee

Mailing Address 164 Post Avenue

City Westbury State NY Zip Code 11590-3170

Purpose of Disbursement  
Charitable Donation: ticket

Candidate Name

012  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: B-E-2691  
Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

250.00

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

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

500.00

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

500.00